

# EXHIBIT G-4



**CVS Caremark<sup>®</sup>**  
**Value Formulary**  
***Effective as of 07/01/2018***

# Value Formulary

Effective 07/01/2018 v2

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## INTRODUCTION

We are pleased to provide the 2018 **Value Formulary** as a useful reference and informational tool. This document can assist practitioners in selecting clinically appropriate and cost-effective products for their patients.

The drugs represented have been reviewed by a National Pharmacy and Therapeutics (P&T) Committee and are approved for inclusion. The document is reflective of current medical practice as of the date of review.

The information contained in this document and its appendices is provided solely for the convenience of medical providers. We do not warrant or assure accuracy of such information nor is it intended to be comprehensive in nature. This document is not intended to be a substitute for the knowledge, expertise, skill and judgment of the medical provider in his or her choice of prescription drugs. All the information in the document is provided as a reference for drug therapy selection. Specific drug selection for an individual patient rests solely with the prescriber.

The document is subject to state-specific regulations and rules, including, but not limited to, those regarding generic substitution, controlled substance schedules, preference for brands and mandatory generics whenever applicable.

We assume no responsibility for the actions or omissions of any medical provider based upon reliance, in whole or in part, on the information contained herein. The medical provider should consult the drug manufacturer's product literature or standard references for more detailed information.

National guidelines can be found on the National Guideline Clearinghouse site at <http://www.guideline.gov>, on the websites listed under each therapeutic class and on the sites listed in the Websites section of this publication.

## PREFACE

The document is organized by sections. Each section is divided by therapeutic drug class primarily defined by mechanism of action. Products are listed by generic name with brand name for reference only. Unless the cited drug is available as an injectable or an exception is specifically noted, generally, all applicable dosage forms and strengths of the drug cited are included in the document.

Drugs represented in this document may have varying cost to the plan member based on the plan's benefit structure. Some prescription benefit plan designs may alter coverage of certain products or vary copay amounts based on the condition being treated. Generic medications typically are available at the lower cost, brand-name medications on the document will generally cost more than generics. Generics should be considered the first line of prescribing subject to applicable rules.

## PHARMACY AND THERAPEUTICS (P&T) COMMITTEE

The services of an independent National Pharmacy and Therapeutics Committee ("P&T Committee") are utilized to approve safe and clinically effective drug therapies. The P&T Committee is an external advisory body of clinical professionals from across the United States. The P&T Committee's voting members include physicians, pharmacists, a pharmacoeconomist and a medical ethicist, all of whom have a broad background of clinical and academic expertise regarding prescription drugs. Employees with significant clinical expertise are invited to meet with the P&T Committee, but no CVS Caremark employee may vote on issues before the P&T Committee. Voting members of the P&T Committee must disclose any financial relationship or conflicts of interest with any pharmaceutical manufacturers.

## DRUG LIST PRODUCT DESCRIPTIONS

To assist in understanding which specific strengths and dosage forms on the document are covered, examples are noted below. The general principles shown in the examples can usually be extended to other entries in the document. Any exceptions are noted.

**Listed products on the document generally include all strengths and all oral dosage forms of the cited product.**

*escitalopram* *Lexapro*  
Oral tablets, oral solution and all strengths of Lexapro would be included in this listing.

**Nasal sprays require a separate entry.**

*sumatriptan nasal spray* *Imitrex*

**Oral disintegrating tablets require a separate entry.**

*ondansetron orally disintegrating tabs* *Zofran ODT*

**Injectable dosage forms require a separate entry.**

*sumatriptan inj* *Imitrex*

**When a strength or dosage form is specified, only the specified strength and dosage form is on the document. Other strengths/dosage forms, including injectable dosage forms of the reference product are not.**

*terbinafine tabs* *Lamisil*  
The tablets formulation is listed on the document, but the oral granules are not.

**Extended-release and delayed-release products require their own entry.**

*metformin* *Glucophage*  
The immediate-release product listing of Glucophage alone would not include the extended-release product Glucophage XR.

*metformin ext-rel* *Glucophage XR*  
A separate entry for Glucophage XR confirms that the extended-release product is on the document.

**Dosage forms on the document will be consistent with the category and use where listed.**

*neomycin/polymyxin B/hydrocortisone* *Cortisporin*  
Since Cortisporin is listed only in the OTIC section, it is limited to the otic solution and suspension. From this entry the topical cream cannot be assumed to be on the list unless there is an entry for this product in the DERMATOLOGY section of the document.

## GENERIC SUBSTITUTION

Generic substitution is a pharmacy action whereby a generic version is dispensed rather than a prescribed brand-name product. **Boldface type** indicates generic availability. However, not all strengths or dosage forms of the generic name in boldface type may be generically available. In most instances, a brand-name drug for which a generic product becomes available will become non-formulary, with the generic product covered in its place, upon release of the generic product to the market. However, the document is subject to state specific regulations and rules regarding generic substitution and mandatory generic rules apply where appropriate.

Generic drugs are usually priced lower than their brand-name equivalents. Prescription generic drugs are:

- Approved by the U.S. Food and Drug Administration for safety and effectiveness, and are manufactured under the same strict standards that apply to brand-name drugs.
- Tested in humans to assure the generic is absorbed into the bloodstream in a similar rate and extent compared to the brand-name drug (bioequivalence). Generics may be different from the

brand in size, color and inactive ingredients, but this does not alter their effectiveness or ability to be absorbed just like the brand-name drug.

- Manufactured in the same strength and dosage form as the brand-name drugs.

When a generic drug is substituted for a brand-name drug, you can expect the generic to produce the same clinical effect and safety profile as the brand-name drug (therapeutic equivalence).

## SPECIALTY MEDICATIONS

A new, rapidly growing category of drugs, specialty medications are the result of continued advances in drug development technology and design. They are created to target and treat complex chronic or genetic medical conditions and include bioengineered proteins, blood-derived products and complex molecules. The therapeutic categories listed below include products that are covered as part of the Specialty benefit.

|  |                                     |
|--|-------------------------------------|
| Acromegaly                                   | Iron Overload                       |
| Alcohol/Opioid Dependency                    | Lipid Disorders                     |
| Allergic Asthma                              | Lipid Disorders - PCSK9 Inhibitors  |
| Alpha-1 Antitrypsin Deficiency               | Lysosomal Storage Disorders         |
| Anemia                                       | Movement Disorders                  |
| Atopic Dermatitis                            | Multiple Sclerosis                  |
| Cardiac Disorders                            | Neutropenia                         |
| Coagulation Disorders                        | Oncology - Injectable               |
| Cryopyrin-Associated Periodic Syndromes      | Oncology - Oral/Topical             |
| Cystic Fibrosis                              | Osteoporosis                        |
| Electrolyte Disorders                        | Paroxysmal Nocturnal Hemoglobinuria |
| Gastrointestinal Disorders-Other             | Phenylketonuria                     |
| Gout   | Pre-Term Birth                      |
| Growth Hormone & Related Disorders           | Psoriasis                           |
| Hematopoietics                               | Pulmonary Arterial Hypertension     |
| Hemophilia, Von Willebrand Disease & Related | Pulmonary Disorders - Other         |
| Bleeding Disorders                           | Renal Disease                       |
| Hepatitis                                    | Respiratory Syncytial Virus         |
| Hereditary Angioedema                        | Retinal Disorders                   |
| HIV Medications                              | Rheumatoid Arthritis                |
| Hormonal Therapies                           | Seizure Disorders                   |
| Immune Deficiencies & Related Disorders      | Systemic Lupus Erythematosus        |
| Immune (Idiopathic) Thrombocytopenic Purpura | Transplant                          |
| Infectious Disease                           | Urea Cycle Disorders                |
| Inflammatory Bowel Disease                   |                                     |

### Specialty Guideline Management (SGM)

SGM is our utilization management program that helps ensure appropriate utilization for specialty medications based on currently accepted evidence-based medicine guidelines. The utilization management program is available for therapeutic areas dispensed by our specialty pharmacies. SGM is designed to help ensure safety and efficacy while preventing off-guideline utilization. Medications which may be included in the SGM program are identified in the document as "SP" for your reference. For additional information, please refer to [www.cvsspecialty.com](http://www.cvsspecialty.com) or to submit a prior authorization, please call 866-814-5506.

## PLAN DESIGN

The document represents a closed formulary plan design. Certain medications on the list are covered if utilization management criteria are met (i.e., Step Therapy, Prior Authorization, Quantity Limits, etc.); requests for use of such medications outside of their listed criteria will be reviewed for medical necessity. If a medication is not listed on the document, a formulary exception may be requested for coverage. Medical necessity or formulary exception requests will be reviewed based on drug-specific prior authorization criteria or standard non-formulary prescription request criteria.



Individual pharmacy benefit plans may impose restrictions or not reimburse some products. In addition, over-the-counter (OTC) products, with the exception of insulin and diabetes monitoring products, are usually not included in the pharmacy benefit. If covered in the pharmacy benefit, OTC products require a valid prescription. OTC products are listed for informational purposes.

Log in to [www.caremark.com](http://www.caremark.com) to check coverage.

## PREVENTIVE SERVICES

The U.S. Department of Health and Human Services (HHS) has adopted Guidelines for Preventive Services under the Affordable Care Act (ACA). Under the ACA, some pharmacy benefit plans may provide a range of preventive services for \$0 member cost share. These items may include:

- Aspirin to Prevent Cardiovascular Disease
- Bowel Preparations for Colorectal Cancer Screening
- Fluoride Supplementation in Children
- Folic Acid Supplementation for Women Expecting or Planning to be Pregnant
- Tobacco Use Counseling and Cessation Intervention
- Immunizations
- Women's Health Preventive Services (i.e., birth control, emergency contraception)
- Statin Use for the Primary Prevention of Cardiovascular Disease in Adults

Items that may be covered as preventive services under this formulary will not be specifically noted since final coverage is determined by the plan sponsor. For additional information regarding preventive services, please refer to <http://www.hhs.gov>.

## LEGEND

|                 |   |
|-----------------|---|
| <b>AL</b>       | Age Limit   |
| <b>OTC</b>      | Over the counter  |
| <b>PA</b>       | Prior Authorization   |
| <b>PA, QL</b>   | Quantity Limit is applied after Prior Authorization approval  |
| <b>QL</b>       | Quantity Limit  |
| <b>QL, PA</b>   | If Quantity Limit is exceeded, Prior Authorization may apply  |
| <b>SP</b>       | Specialty Drug  |
| <b>ST</b>       | Step Therapy  |
| <b>ST, PA</b>   | If Step Therapy requirements are not met, Prior Authorization may apply   |
| <b>boldface</b> | Indicates generic availability; boldface may not apply to every strength or dosage form under the listed generic name |
| delayed-rel     | Delayed-release (also known as enteric-coated), refer to the reference brand listed for clarification                 |
| ext-rel         | Extended-release (also known as sustained-release), refer to the reference brand listed for clarification             |

## NOTICE

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CVS Caremark does not operate the websites/organizations listed here, nor is it responsible for the availability or reliability of the websites' content. These listings do not imply or constitute an endorsement, sponsorship or recommendation by CVS Caremark.

**Please be advised that this document is updated periodically and changes may appear prior to their effective date to allow for client notification.**

**ANALGESICS**

Practice guidelines of pain management are available at:

<http://www.asahq.org>

**ANALGESICS, OTHER**

Treatment recommendations for osteoarthritis are available at:

<http://www.rheumatology.org>

|               |                               |             |
|---------------|-------------------------------|-------------|
| <b>OTC</b>    | acetaminophen                 | TYLENOL     |
| <b>NSAIDs</b> |                               |             |
|               | diclofenac potassium          |             |
|               | diclofenac sodium delayed-rel |             |
|               | diclofenac sodium ext-rel     |             |
|               | diflunisal                    |             |
|               | etodolac                      |             |
|               | fenoprofen                    |             |
|               | flurbiprofen                  |             |
|               | ibuprofen                     |             |
| <b>OTC</b>    | ibuprofen                     | ADVIL       |
|               | ketoprofen                    |             |
|               | ketoprofen ext-rel            |             |
|               | ketorolac                     |             |
|               | ketorolac inj                 |             |
|               | meloxicam                     | MOBIC       |
|               | nabumetone                    |             |
|               | naproxen                      | NAPROSYN    |
|               | naproxen delayed-rel          | EC-NAPROSYN |
| <b>OTC</b>    | naproxen sodium               | ALEVE       |
|               | naproxen sodium               | ANAPROX     |
|               | oxaprozin                     | DAYPRO      |
|               | piroxicam                     | FELDENE     |
|               | sulindac                      |             |
|               | tolmetin                      |             |
| <b>GOUT</b>   |                               |             |
|               | allopurinol                   | ZYLOPRIM    |
|               | colchicine                    | COLCRYS     |
|               | probenecid                    |             |

**OPIOID ANALGESICS**

Practice Guidelines for Cancer Pain Management (includes WHO analgesic ladder) are available at:

<http://www.asahq.org>

<http://www.nccn.org>

Opioid guidelines in the management of chronic non-malignant pain are available at:

<http://www.asipp.org/Guidelines.htm>

The quantity of opioid products prescribed (including those that are combined with acetaminophen, aspirin or ibuprofen) will be limited to up to 90 morphine milligram equivalents (MME) per day based on a 30-day supply. Members who are opioid-naïve may be subject to additional step therapy requirements (use of an immediate-release (IR) formulation will be required before moving to an extended-release (ER) formulation) and quantity limit restrictions (first fill will be limited to seven days).

|               |                       |                   |
|---------------|-----------------------|-------------------|
| <b>QL, PA</b> | codeine sulfate       |                   |
| <b>QL</b>     | codeine/acetaminophen | TYLENOL w/CODEINE |
| <b>PA, QL</b> | fentanyl lozenge      | ACTIQ             |

|           |                                     |            |
|-----------|-------------------------------------|------------|
| QL, PA, † | fentanyl transdermal                | DURAGESIC  |
| QL        | hydrocodone/acetaminophen           | NORCO      |
| QL        | hydrocodone/acetaminophen - Vicodin |            |
| QL, PA    | hydromorphone                       | DILAUDID   |
| QL, PA    | levorphanol tartrate                |            |
| QL, PA    | methadone                           | DOLOPHINE  |
| QL, PA    | morphine                            |            |
| QL, PA, † | morphine ext-rel                    | KADIAN     |
| QL, PA, † | morphine ext-rel                    | MS CONTIN  |
| QL, PA    | morphine supp                       |            |
| QL, PA, † | morphine/naltrexone ext-rel         | EMBEDA     |
| QL, PA    | oxycodone                           | ROXICODONE |
| QL, PA, † | oxycodone ext-rel                   | XTAMPZA ER |
| QL        | oxycodone/acetaminophen             | PERCOCET   |
| QL        | oxycodone/acetaminophen soln        |            |
| QL, PA    | tramadol                            | ULTRAM     |
| QL, PA, † | tramadol ext-rel tabs               |            |

† Initial PA may apply to higher strengths

#### VISCOSUPPLEMENTS

|        |                    |         |
|--------|--------------------|---------|
| PA, SP | sodium hyaluronate | GEL-ONE |
| PA, SP | sodium hyaluronate | VISCO-3 |

#### ANTI-INFECTIVES

Practice guidelines and statements developed and endorsed by the Infectious Diseases Society of America are available at:  
<http://www.idsociety.org>

**Hepatitis:** CDC recommendations on the treatment of hepatitis are available at:  
<http://www.cdc.gov/hepatitis/Resources/>

Guidelines for the management of chronic hepatitis by the American Association for the Study of Liver Disease are available at:  
<http://www.aasld.org>

**HIV/AIDS:** Guidelines for the treatment of HIV patients by the U.S. Department of Health and Human Services are available at:  
<http://www.aidsinfo.nih.gov>

**Infective Endocarditis:** American Heart Association recommendations for the prevention of bacterial endocarditis are available at:  
<http://www.myamericanheart.org>

**Influenza:** Recommendations of the Advisory Committee on Immunization Practices are available at:  
<http://www.cdc.gov/ncidod/diseases/flu/fluvirus.htm>

**International Travel:** CDC recommendations for international travel are available at:  
<http://www.cdc.gov/travel>

**Respiratory Tract Infection/Antibiotic Use/Community Acquired Pneumonia/Other:** Principles of appropriate antibiotic use for treatment of nonspecific upper respiratory tract infection in adults are available at:  
<http://www.cdc.gov/flu/>

**Sexually Transmitted Diseases:** CDC Sexually Transmitted Diseases Guidelines are available at:  
<http://www.cdc.gov/std/treatment/default.htm>

**ANTIBACTERIALS****Cephalosporins***First Generation*

|  |                   |        |
|--|-------------------|--------|
|  | <b>cefadroxil</b> |        |
|  | <b>cephalexin</b> | KEFLEX |

*Second Generation*

|  |                          |        |
|--|--------------------------|--------|
|  | <b>cefprozil</b>         |        |
|  | <b>cefuroxime axetil</b> | CEFTIN |

*Third Generation*

|  |                     |        |
|--|---------------------|--------|
|  | <b>cefdinir</b>     |        |
|  | <b>cefepodoxime</b> | VANTIN |

**Erythromycins/Macrolides**

|           |                                    |            |
|-----------|------------------------------------|------------|
|           | <b>azithromycin</b>                | ZITHROMAX  |
|           | <b>clarithromycin</b>              |            |
|           | <b>clarithromycin ext-rel</b>      |            |
|           | <b>erythromycin delayed-rel</b>    |            |
|           | <b>erythromycin ethylsuccinate</b> | E.E.S.     |
|           | <b>erythromycin stearate</b>       | ERYTHROCIN |
| <b>PA</b> | <b>fidaxomicin</b>                 | DIFICID    |

**Fluoroquinolones**

|  |                              |          |
|--|------------------------------|----------|
|  | <b>ciprofloxacin</b>         | CIPRO    |
|  | <b>ciprofloxacin ext-rel</b> |          |
|  | <b>levofloxacin</b>          | LEVAQUIN |
|  | <b>moxifloxacin</b>          | AVELOX   |

**Penicillins**

|  |  |              |
|--|--|--------------|
|  | <b>amoxicillin</b>                     |              |
|  | <b>amoxicillin/clavulanate</b>         | AUGMENTIN    |
|  | <b>amoxicillin/clavulanate ext-rel</b> | AUGMENTIN XR |
|  | <b>ampicillin</b>                      |              |
|  | <b>dicloxacillin</b>                   |              |
|  | <b>penicillin VK</b>                   |              |

**Tetracyclines**

|  |                                     |            |
|--|-------------------------------------|------------|
|  | <b>doxycycline hyclate</b>          | VIBRAMYCIN |
|  | <b>doxycycline hyclate tabs</b>     |            |
|  | <b>doxycycline monohydrate susp</b> | VIBRAMYCIN |
|  | <b>minocycline</b>                  | MINOCIN    |
|  | <b>minocycline ext-rel</b>          |            |
|  | <b>tetracycline</b>                 |            |

**ANTIFUNGALS**

|  |                               |          |
|--|-------------------------------|----------|
|  | <b>clotrimazole troches</b>   |          |
|  | <b>fluconazole</b>            | DIFLUCAN |
|  | <b>griseofulvin microsize</b> |          |
|  | <b>itraconazole</b>           | SPORANOX |
|  | <b>nystatin</b>               |          |
|  | <b>posaconazole</b>           | NOXAFIL  |
|  | <b>terbinafine tabs</b>       | LAMISIL  |
|  | <b>voriconazole</b>           | VFEND    |

**ANTIRETROVIRAL AGENTS****Antiretroviral Adjuvants**

|               |            |        |
|---------------|------------|--------|
| <b>QL, PA</b> | cobicistat | TYBOST |
|---------------|------------|--------|

**Antiretroviral Combinations**

|               |   |           |
|---------------|---|-----------|
| <b>QL, PA</b> | abacavir/dolutegravir/lamivudine                            | TRIUMEQ   |
| <b>QL, PA</b> | <b>abacavir/lamivudine</b>                                  | EPZICOM   |
| <b>QL, PA</b> | <b>abacavir/lamivudine/zidovudine</b>                       | TRIZIVIR  |
| <b>QL, PA</b> | atazanavir/cobicistat                                       | EVOTAZ    |
| <b>QL, PA</b> | darunavir/cobicistat  | PREZCOBIX |
| <b>QL, PA</b> | efavirenz/emtricitabine/tenofovir                           | ATRIPLA   |
| <b>QL, PA</b> | elvitegravir/cobicistat/emtricitabine/tenofovir             | STRIBILD  |
| <b>QL, PA</b> | elvitegravir/cobicistat/emtricitabine/tenofovir alafenamide | GENVOYA   |
| <b>QL, PA</b> | emtricitabine/rilpivirine/tenofovir                         | COMPLERA  |
| <b>QL, PA</b> | emtricitabine/rilpivirine/tenofovir alafenamide             | ODEFSEY   |
| <b>QL, PA</b> | emtricitabine/tenofovir                                     | TRUVADA   |
| <b>QL, PA</b> | emtricitabine/tenofovir alafenamide                         | DESCOVY   |
| <b>QL, PA</b> | <b>lamivudine/zidovudine</b>                                | COMBIVIR  |

**Chemokine Receptor Antagonists**

|               |           |           |
|---------------|-----------|-----------|
| <b>QL, PA</b> | maraviroc | SELZENTRY |
|---------------|-----------|-----------|

**Integrase Inhibitors**

|               |              |              |
|---------------|--------------|--------------|
| <b>QL, PA</b> | dolutegravir | TIVICAY      |
| <b>QL, PA</b> | raltegravir  | ISENTRESS    |
| <b>QL, PA</b> | raltegravir  | ISENTRESS HD |

**Non-nucleoside Reverse Transcriptase Inhibitors**

|               |                           |             |
|---------------|---------------------------|-------------|
| <b>QL, PA</b> | <b>efavirenz</b>          | SUSTIVA     |
| <b>QL, PA</b> | etravirine                | INTELENCE   |
| <b>QL, PA</b> | <b>nevirapine</b>         | VIRAMUNE    |
| <b>QL, PA</b> | <b>nevirapine ext-rel</b> | VIRAMUNE XR |
| <b>QL, PA</b> | rilpivirine               | EDURANT     |

**Nucleoside Reverse Transcriptase Inhibitors**

|               |                               |          |
|---------------|-------------------------------|----------|
| <b>QL, PA</b> | <b>abacavir</b>               | ZIAGEN   |
| <b>QL, PA</b> | <b>didanosine delayed-rel</b> | VIDEX EC |
| <b>QL, PA</b> | didanosine soln               | VIDEX    |
| <b>QL, PA</b> | emtricitabine                 | EMTRIVA  |
| <b>QL, PA</b> | <b>lamivudine</b>             | EPIVIR   |
| <b>QL, PA</b> | <b>stavudine</b>              | ZERIT    |
| <b>QL, PA</b> | <b>zidovudine</b>             | RETROVIR |

**Nucleotide Reverse Transcriptase Inhibitors**

|               |                                      |        |
|---------------|--------------------------------------|--------|
| <b>QL, PA</b> | <b>tenofovir disoproxil fumarate</b> | VIREAD |
|---------------|--------------------------------------|--------|

**Protease Inhibitors**

|               |                            |          |
|---------------|----------------------------|----------|
| <b>QL, PA</b> | <b>atazanavir</b>          | REYATAZ  |
| <b>QL, PA</b> | darunavir                  | PREZISTA |
| <b>QL, PA</b> | <b>fosamprenavir</b>       | LEXIVA   |
| <b>QL, PA</b> | <b>lopinavir/ritonavir</b> | KALETRA  |
| <b>QL, PA</b> | ritonavir                  | NORVIR   |

**ANTITUBERCULAR AGENTS**

|  |                    |                  |
|--|--------------------|------------------|
|  | capreomycin        | CAPASTAT SULFATE |
|  | <b>cycloserine</b> |                  |

|                                   |           |
|-----------------------------------|-----------|
| <b>ethambutol</b>                 | MYAMBUTOL |
| ethionamide                       | TRECATOR  |
| <b>isoniazid</b>                  |           |
| isoniazid/rifampin                | RIFAMATE  |
| isoniazid-rifampin w/pyrazinamide | RIFATER   |
| <b>pyrazinamide</b>               |           |
| <b>rifampin</b>                   | RIFADIN   |
| rifapentine                       | PRIFTIN   |
| <b>streptomycin sulfate</b>       |           |

**ANTIVIRALS****Cytomegalovirus Agents**

|                       |         |
|-----------------------|---------|
| <b>valganciclovir</b> | VALCYTE |
|-----------------------|---------|

**Hepatitis Agents***Hepatitis B*

|                       |            |
|-----------------------|------------|
| <b>entecavir</b>      | BARACLUDE  |
| <b>lamivudine</b>     | EPIVIR-HBV |
| tenofovir alafenamide | VEMLIDY    |

*Hepatitis C*

|                      |                                     |         |
|----------------------|-------------------------------------|---------|
| <b>#, PA, SP, QL</b> | ledipasvir/sofosbuvir               | HARVONI |
| <b>PA, SP</b>        | <b>ribavirin caps</b>               | REBETOL |
| <b>PA, SP</b>        | <b>ribavirin caps - Ribasphere</b>  |         |
| <b>PA, SP</b>        | ribavirin oral soln                 | REBETOL |
| <b>PA, SP</b>        | <b>ribavirin tabs</b>               | COPEGUS |
| <b>#, PA, SP, QL</b> | sofosbuvir/velpatasvir              | EPCLUSA |
| <b>*, PA, SP, QL</b> | sofosbuvir/velpatasvir/voxilaprevir | VOSEVI  |

# HARVONI only for genotypes 1, 4, 5 and 6  
EPCLUSA for genotypes 1, 2, 3, 4, 5, 6

\* For use in patients previously treated with an HCV regimen containing an NS5A inhibitor (for genotypes 1-6) or sofosbuvir without an NS5A inhibitor (for genotypes 1a or 3).

**Herpes Agents**

|                     |         |
|---------------------|---------|
| <b>acyclovir</b>    | ZOVIRAX |
| <b>famciclovir</b>  |         |
| <b>valacyclovir</b> | VALTREX |

**Influenza Agents**

|               |                    |         |
|---------------|--------------------|---------|
| <b>QL, PA</b> | <b>oseltamivir</b> | TAMIFLU |
|---------------|--------------------|---------|

**MISCELLANEOUS**

|           |                                     |             |
|-----------|-------------------------------------|-------------|
|           | <b>atovaquone</b>                   | MEPRON      |
|           | <b>clindamycin</b>                  | CLEOCIN     |
|           | <b>dapsone</b>                      |             |
|           | <b>ivermectin</b>                   | STROMECTOL  |
| <b>PA</b> | <b>linezolid</b>                    | ZYVOX       |
| <b>PA</b> | <b>linezolid inj</b>                | ZYVOX       |
|           | mebendazole                         | EMVERM      |
|           | <b>metronidazole</b>                | FLAGYL      |
|           | <b>nitrofurantoin ext-rel</b>       | MACROBID    |
|           | <b>nitrofurantoin macrocrystals</b> | MACRODANTIN |
|           | praziquantel                        | BILTRICIDE  |
|           | <b>rifabutin</b>                    | MYCOBUTIN   |

|           |   |          |
|-----------|---|----------|
| <b>PA</b> | rifaximin 550 mg                        | XIFAXAN  |
|           | <b>sulfamethoxazole/trimethoprim</b>    |          |
|           | <b>sulfamethoxazole/trimethoprim DS</b> |          |
|           | <b>tinidazole</b>                       | TINDAMAX |
|           | <b>trimethoprim</b>                     |          |
| <b>QL</b> | <b>vancomycin</b>                       | VANCOCIN |

## ANTINEOPLASTIC AGENTS

Clinical practice guidelines in oncology are available at:

<http://www.asco.org>

<http://www.nccn.org>

Most oncology medications are eligible for coverage and some may require prior authorization. Please call the Customer Care phone number located on the prescription ID card for coverage determination.

## HORMONAL ANTINEOPLASTIC AGENTS

### Luteinizing Hormone-Releasing Hormone (LHRH) Agonists

|               |                    |              |
|---------------|--------------------|--------------|
| <b>PA, SP</b> | leuprolide acetate | LUPRON DEPOT |
|---------------|--------------------|--------------|

## ORAL HORMONAL ANTINEOPLASTIC AGENTS

### Antiandrogens

|                   |                     |           |
|-------------------|---------------------|-----------|
| <b>PA, SP, QL</b> | abiraterone         | ZYTIGA    |
|                   | <b>bicalutamide</b> |           |
|                   | <b>flutamide</b>    |           |
|                   | <b>nilutamide</b>   | NILANDRON |

### Antiestrogens/Selective Estrogen Receptor Modifiers

|  |                  |          |
|--|------------------|----------|
|  | fulvestrant      | FASLODEX |
|  | <b>tamoxifen</b> |          |
|  | toremifene       | FARESTON |

### Aromatase Inhibitors

|  |                    |          |
|--|--------------------|----------|
|  | <b>anastrozole</b> | ARIMIDEX |
|  | <b>exemestane</b>  | AROMASIN |
|  | <b>letrozole</b>   | FEMARA   |

### Progestins

|  |                          |  |
|--|--------------------------|--|
|  | <b>megestrol acetate</b> |  |
|--|--------------------------|--|

## ORAL NON-HORMONAL ANTINEOPLASTIC AGENTS

### Alkylating Agents

|               |                       |           |
|---------------|-----------------------|-----------|
|               | altretamine           | HEXALEN   |
|               | busulfan              | MYLERAN   |
|               | chlorambucil          | LEUKERAN  |
|               | cyclophosphamide caps |           |
|               | estramustine          | EMCYT     |
|               | lomustine             | GLEOSTINE |
|               | <b>melphalan</b>      | ALKERAN   |
| <b>PA, SP</b> | <b>temozolomide</b>   | TEMODAR   |

### Antimetabolites

|                   |                       |        |
|-------------------|-----------------------|--------|
| <b>PA, SP, QL</b> | <b>capecitabine</b>   | XELODA |
|                   | <b>mercaptopurine</b> |        |
|                   | thioguanine           |        |



**Immunomodulators**

|                   |              |          |
|-------------------|--------------|----------|
| <b>PA, SP, QL</b> | lenalidomide | REVLIMID |
|-------------------|--------------|----------|

**Kinase Inhibitors**

|                   |                        |                        |
|-------------------|------------------------|------------------------|
| <b>PA, SP, QL</b> | acalabrutinib          | CALQUENCE              |
| <b>PA, SP, QL</b> | afatinib               | GILOTTRIF              |
| <b>PA, SP, QL</b> | alectinib              | ALECENSA               |
| <b>PA, SP, QL</b> | axitinib               | INLYTA                 |
| <b>PA, SP, QL</b> | cabozantinib           | CABOMETYX              |
| <b>PA, SP, QL</b> | cabozantinib           | COMETRIQ               |
| <b>PA, SP, QL</b> | ceritinib              | ZYKADIA                |
| <b>PA, SP, QL</b> | crizotinib             | XALKORI                |
| <b>PA, SP, QL</b> | dabrafenib             | TAFINLAR               |
| <b>PA, SP, QL</b> | erlotinib              | TARCEVA                |
| <b>PA, SP, QL</b> | everolimus             | AFINITOR               |
| <b>PA, SP, QL</b> | ibrutinib              | IMBRUVICA              |
| <b>PA, SP, QL</b> | idelalisib             | ZYDELIG                |
| <b>PA, SP, QL</b> | lapatinib              | TYKERB                 |
| <b>PA, SP, QL</b> | lenvatinib             | LENVIMA                |
| <b>PA, SP, QL</b> | midostaurin            | RYDAPT                 |
| <b>PA, SP, QL</b> | palbociclib            | IBRANCE                |
| <b>PA, SP, QL</b> | pazopanib              | VOTRIENT               |
| <b>PA, SP, QL</b> | regorafenib            | STIVARGA               |
| <b>PA, SP, QL</b> | ribociclib             | KISQALI                |
| <b>PA, SP, QL</b> | ribociclib + letrozole | KISQALI FEMARA CO-PACK |
| <b>PA, SP, QL</b> | ruxolitinib            | JAKAFI                 |
| <b>PA, SP, QL</b> | sorafenib              | NEXAVAR                |
| <b>PA, SP, QL</b> | sunitinib              | SUTENT                 |
| <b>PA, SP, QL</b> | trametinib             | MEKINIST               |
| <b>PA, SP, QL</b> | vandetanib             | CAPRELSA               |
| <b>PA, SP, QL</b> | vemurafenib            | ZELBORAF               |

**Kinase Inhibitors for CML**

|                   |                   |         |
|-------------------|-------------------|---------|
| <b>PA, SP, QL</b> | imatinib mesylate | GLEEVEC |
|-------------------|-------------------|---------|

**Topoisomerase Inhibitors**

|  |                |          |
|--|----------------|----------|
|  | topotecan caps | HYCAMTIN |
|--|----------------|----------|

**MISCELLANEOUS**

|                   |                        |           |
|-------------------|------------------------|-----------|
| <b>PA, SP</b>     | <b>bexarotene caps</b> | TARGRETIN |
| <b>PA, SP, QL</b> | enasidenib             | IDHIFA    |
|                   | <b>etoposide caps</b>  |           |
|                   | <b>hydroxyurea</b>     | HYDREA    |
|                   | mitotane               | LYSODREN  |
| <b>PA, SP, QL</b> | olaparib               | LYNPARZA  |
| <b>PA, SP</b>     | panobinostat           | FARYDAK   |
|                   | procarbazine           | MATULANE  |
| <b>PA, SP, QL</b> | rucaparib              | RUBRACA   |
| <b>PA, SP, QL</b> | sonidegib              | ODOMZO    |
|                   | <b>tretinoin caps</b>  |           |
|                   | uridine triacetate     | VISTOGARD |
| <b>PA, SP</b>     | venetoclax             | VENCLEXTA |
| <b>PA, SP, QL</b> | vismodegib             | ERIVEDGE  |
| <b>PA, SP, QL</b> | vorinostat             | ZOLINZA   |

**CARDIOVASCULAR**

The Eighth Report of the Joint National Committee on Prevention, Detection, Evaluation and Treatment of High Blood Pressure is available at:

<http://jama.jamanetwork.com/article.aspx?articleid=1791497>

Guidelines for the evaluation and management of cardiovascular diseases in adults are available at:

<http://www.acc.org>

<http://www.heartfailureguideline.org>

<http://www.myamericanheart.org>

**ACE INHIBITORS**

Guidelines for the use of ACE inhibitors are available at:

<http://jama.jamanetwork.com/article.aspx?articleid=1791497>

<http://professional.diabetes.org>

<http://www.acc.org>

<http://www.myamericanheart.org>

|                     |         |
|---------------------|---------|
| <b>captopril</b>    |         |
| <b>enalapril</b>    | VASOTEC |
| <b>lisinopril</b>   | ZESTRIL |
| <b>perindopril</b>  |         |
| <b>ramipril</b>     | ALTACE  |
| <b>trandolapril</b> |         |

**ACE INHIBITOR/CALCIUM CHANNEL BLOCKER COMBINATIONS**

|                              |        |
|------------------------------|--------|
| <b>amlodipine/benazepril</b> | LOTREL |
|------------------------------|--------|

**ACE INHIBITOR/DIURETIC COMBINATIONS**

|                                       |            |
|---------------------------------------|------------|
| <b>captopril/hydrochlorothiazide</b>  |            |
| <b>enalapril/hydrochlorothiazide</b>  | VASERETIC  |
| <b>lisinopril/hydrochlorothiazide</b> | ZESTORETIC |

**ADRENOLYTICS, CENTRAL**

|                              |              |
|------------------------------|--------------|
| <b>clonidine</b>             | CATAPRES     |
| <b>clonidine transdermal</b> | CATAPRES-TTS |

**ALDOSTERONE RECEPTOR ANTAGONISTS**

|                       |           |
|-----------------------|-----------|
| <b>eplerenone</b>     | INSPIRA   |
| <b>spironolactone</b> | ALDACTONE |

**ANGIOTENSIN II RECEPTOR ANTAGONISTS/DIURETIC COMBINATIONS**

Guidelines for the use of angiotensin II receptor antagonists in various patient populations are available at:

<http://jama.jamanetwork.com/article.aspx?articleid=1791497>

<http://professional.diabetes.org>

|                                       |             |
|---------------------------------------|-------------|
| <b>irbesartan</b>                     | AVAPRO      |
| <b>irbesartan/hydrochlorothiazide</b> | AVALIDE     |
| <b>losartan</b>                       | COZAAR      |
| <b>losartan/hydrochlorothiazide</b>   | HYZAAR      |
| <b>olmesartan</b>                     | BENICAR     |
| <b>olmesartan/hydrochlorothiazide</b> | BENICAR HCT |
| <b>valsartan</b>                      | DIOVAN      |
| <b>valsartan/hydrochlorothiazide</b>  | DIOVAN HCT  |

**ANGIOTENSIN II RECEPTOR ANTAGONIST/CALCIUM CHANNEL BLOCKER COMBINATIONS**

|  |                  |
|--|------------------|
| <b>amlodipine/olmesartan</b>                     | <b>AZOR</b>      |
| <b>olmesartan/amlodipine/hydrochlorothiazide</b> | <b>TRIBENZOR</b> |

**ANTIARRHYTHMICS**

Guidelines for the use of antiarrhythmics and cardiac glycosides in various patient populations are available at:

<http://www.acc.org>

|                                 |                    |
|---------------------------------|--------------------|
| <b>acebutolol</b>               |                    |
| <b>amiodarone</b>               |                    |
| <b>amiodarone - Pacerone</b>    |                    |
| <b>disopyramide</b>             | <b>NORPACE</b>     |
| disopyramide ext-rel            | NORPACE CR         |
| <b>PA, SP</b> <b>dofetilide</b> | <b>TIKOSYN</b>     |
| <b>flecainide</b>               |                    |
| <b>ibutilide</b>                | <b>CORVERT</b>     |
| <b>propafenone</b>              |                    |
| <b>propafenone ext-rel</b>      | <b>RYTHMOL SR</b>  |
| <b>sotalol</b>                  | <b>BETAPACE</b>    |
| <b>sotalol</b>                  | <b>BETAPACE AF</b> |

**ANTILIPEMICS**

The 2013 ACC/AHA Guideline on the Treatment of Blood Cholesterol to Reduce Atherosclerotic Cardiovascular Risk in Adults is available at:

<http://circ.ahajournals.org/content/early/2013/11/11/01.cir.0000437738.63853.7a>

**Bile Acid Resins**

|                       |                                |
|-----------------------|--------------------------------|
| <b>cholestyramine</b> | <b>QUESTRAN/QUESTRAN LIGHT</b> |
| <b>colestipol</b>     | <b>COLESTID</b>                |

**Cholesterol Absorption Inhibitors**

|                  |              |
|------------------|--------------|
| <b>ezetimibe</b> | <b>ZETIA</b> |
|------------------|--------------|

**Fibrates**

|                    |                |
|--------------------|----------------|
| <b>fenofibrate</b> | <b>LOFIBRA</b> |
| <b>fenofibrate</b> | <b>TRICOR</b>  |
| <b>gemfibrozil</b> | <b>LOPID</b>   |

**HMG-CoA Reductase Inhibitors**

|                     |                  |
|---------------------|------------------|
| <b>atorvastatin</b> | <b>LIPITOR</b>   |
| <b>pravastatin</b>  | <b>PRAVACHOL</b> |
| <b>rosuvastatin</b> | <b>CRESTOR</b>   |
| <b>simvastatin</b>  | <b>ZOCOR</b>     |

**Niacins**

|                       |                |
|-----------------------|----------------|
| <b>niacin ext-rel</b> | <b>NIASPAN</b> |
|-----------------------|----------------|

**PCSK9 Inhibitors**

|                                     |                |
|-------------------------------------|----------------|
| <b>PA, SP, QL</b> <b>evolocumab</b> | <b>REPATHA</b> |
|-------------------------------------|----------------|

**BETA-BLOCKERS**

Guidelines for the use of beta-blockers and beta-blocker combinations in various patient populations are available at:

<http://jama.jamanetwork.com/article.aspx?articleid=1791497>

<http://www.acc.org>

|                   |                 |
|-------------------|-----------------|
| <b>atenolol</b>   | <b>TENORMIN</b> |
| <b>bisoprolol</b> |                 |

|                                 |            |
|---------------------------------|------------|
| carvedilol                      | COREG      |
| labetalol                       | TRANDATE   |
| metoprolol 25 mg, 50 mg, 100 mg | LOPRESSOR  |
| metoprolol ext-rel              | TOPROL-XL  |
| nadolol                         | CORGARD    |
| pindolol                        |            |
| propranolol                     |            |
| propranolol ext-rel             | INDERAL LA |

**BETA-BLOCKER/DIURETIC COMBINATIONS**

Guidelines for the use of beta-blockers and diuretic combinations in various patient populations are available at:

<http://jama.jamanetwork.com/article.aspx?articleid=1791497>

<http://www.acc.org>

|                                 |               |
|---------------------------------|---------------|
| atenolol/chlorthalidone         | TENORETIC     |
| bisoprolol/hydrochlorothiazide  | ZIAC          |
| metoprolol/hydrochlorothiazide  | LOPRESSOR HCT |
| nadolol/bendroflumethiazide     | CORZIDE       |
| propranolol/hydrochlorothiazide |               |

**CALCIUM CHANNEL BLOCKERS**

Guidelines for the use of calcium channel blockers in various patient populations are available at:

<http://jama.jamanetwork.com/article.aspx?articleid=1791497>

<http://www.acc.org>

**Dihydropyridines**

|                    |              |
|--------------------|--------------|
| amlodipine         | NORVASC      |
| felodipine ext-rel |              |
| isradipine         |              |
| nicardipine        |              |
| nifedipine ext-rel | ADALAT CC    |
| nifedipine ext-rel | PROCARDIA XL |

**Nondihydropyridines**

|                   |             |
|-------------------|-------------|
| diltiazem ext-rel | CARDIZEM CD |
| diltiazem ext-rel | CARDIZEM LA |
| diltiazem ext-rel | TIAZAC      |
| verapamil ext-rel | CALAN SR    |
| verapamil ext-rel | VERELAN     |
| verapamil ext-rel | VERELAN PM  |

**DIGITALIS GLYCOSIDES**

|                    |         |
|--------------------|---------|
| digoxin            | LANOXIN |
| digoxin ped elixir |         |

**DIURETICS****Loop Diuretics**

|            |         |
|------------|---------|
| bumetanide |         |
| furosemide | LASIX   |
| toremide   | DEMADEX |

**Potassium-sparing Diuretics**

|           |  |
|-----------|--|
| amiloride |  |
|-----------|--|

**Thiazides and Thiazide-like Diuretics**

|                     |  |
|---------------------|--|
| chlorthalidone      |  |
| hydrochlorothiazide |  |

|            |  |
|------------|--|
| indapamide |  |
| metolazone |  |

**Diuretic Combinations**

|                                    |             |
|------------------------------------|-------------|
| amiloride/hydrochlorothiazide      |             |
| spironolactone/hydrochlorothiazide | ALDACTAZIDE |
| triamterene/hydrochlorothiazide    | DYAZIDE     |
| triamterene/hydrochlorothiazide    | MAXZIDE     |

**HEART FAILURE**

|                      |          |
|----------------------|----------|
| ivabradine           | CORLANOR |
| sacubitril/valsartan | ENTRESTO |

**NITRATES****Oral**

|                                   |         |
|-----------------------------------|---------|
| isosorbide dinitrate              | ISORDIL |
| isosorbide dinitrate ext-rel tabs |         |
| isosorbide mononitrate            |         |
| isosorbide mononitrate ext-rel    |         |

**Sublingual**

|                          |           |
|--------------------------|-----------|
| nitroglycerin sublingual | NITROSTAT |
|--------------------------|-----------|

**Transdermal**

|                           |           |
|---------------------------|-----------|
| nitroglycerin transdermal | NITRO-DUR |
|---------------------------|-----------|

**PULMONARY ARTERIAL HYPERTENSION****Endothelin Receptor Antagonists**

|                   |             |          |
|-------------------|-------------|----------|
| <b>PA, SP, QL</b> | ambrisentan | LETAIRIS |
| <b>PA, SP, QL</b> | bosentan    | TRACLEER |
| <b>PA, SP, QL</b> | macitentan  | OPSUMIT  |

**Phosphodiesterase Inhibitors**

|                   |            |         |
|-------------------|------------|---------|
| <b>PA, SP, QL</b> | sildenafil | REVATIO |
|-------------------|------------|---------|

**Prostacyclin Receptor Agonists**

|               |           |         |
|---------------|-----------|---------|
| <b>PA, SP</b> | selexipag | UPTRAVI |
|---------------|-----------|---------|

**Prostaglandin Vasodilators**

|               |                      |           |
|---------------|----------------------|-----------|
| <b>PA, SP</b> | treprostinil ext-rel | ORENITRAM |
|---------------|----------------------|-----------|

**MISCELLANEOUS**

|                    |        |
|--------------------|--------|
| hydralazine        |        |
| methyldopa         |        |
| midodrine          |        |
| ranolazine ext-rel | RANEXA |

**CENTRAL NERVOUS SYSTEM**

Practice guidelines for psychiatric disorders are available at:  
<http://www.psych.org>

**ANTI-ANXIETY****Benzodiazepines**

|           |                                       |                |
|-----------|---------------------------------------|----------------|
| <b>QL</b> | alprazolam                            | XANAX          |
| <b>QL</b> | alprazolam orally disintegrating tabs |                |
| <b>QL</b> | clorazepate                           | TRANXENE T-TAB |

|           |           |        |
|-----------|-----------|--------|
| <b>QL</b> | diazepam  | VALIUM |
| <b>QL</b> | lorazepam | ATIVAN |
| <b>QL</b> | oxazepam  |        |

**Miscellaneous**

|  |             |  |
|--|-------------|--|
|  | buspirone   |  |
|  | fluvoxamine |  |

**ANTICONVULSANTS**

Practice guidelines for the treatment of epilepsy are available at:  
<http://www.aan.com>

|                   |                                 |                       |
|-------------------|---------------------------------|-----------------------|
|                   | carbamazepine                   | TEGRETOL              |
|                   | carbamazepine ext-rel           | TEGRETOL-XR           |
|                   | clonazepam tabs                 | KLONOPIN              |
|                   | divalproex sodium delayed-rel   | DEPAKOTE              |
|                   | divalproex sodium ext-rel       | DEPAKOTE ER           |
|                   | divalproex sodium sprinkle caps | DEPAKOTE SPRINKLE     |
|                   | ethosuximide                    | ZARONTIN              |
|                   | felbamate                       | FELBATOL              |
|                   | gabapentin caps, tabs           | NEURONTIN             |
|                   | lamotrigine                     | LAMICTAL              |
|                   | lamotrigine ext-rel             | LAMICTAL XR           |
|                   | levetiracetam                   | KEPPRA                |
|                   | levetiracetam ext-rel           | KEPPRA XR             |
|                   | oxcarbazepine                   | TRILEPTAL             |
|                   | phenobarbital                   |                       |
|                   | phenytoin chewable tabs         | DILANTIN INFATABS     |
|                   | phenytoin sodium extended       | DILANTIN              |
|                   | phenytoin susp                  | DILANTIN              |
|                   | primidone                       | MYSOLINE              |
|                   | tiagabine                       | GABITRIL              |
|                   | topiramate                      | TOPAMAX               |
|                   | topiramate sprinkle caps        | TOPAMAX SPRINKLE CAPS |
|                   | valproic acid                   | DEPAKENE              |
| <b>PA, SP, QL</b> | vigabatrin powder               | SABRIL                |
|                   | zonisamide                      | ZONEGRAN              |

**ANTIDEMENTIA**

Practice guidelines for the management of dementia are available at:  
<http://www.aan.com>

|  |                                      |              |
|--|--------------------------------------|--------------|
|  | donepezil                            | ARICEPT      |
|  | donepezil orally disintegrating tabs |              |
|  | galantamine                          |              |
|  | galantamine ext-rel                  | RAZADYNE ER  |
|  | memantine                            | NAMENDA      |
|  | rivastigmine                         |              |
|  | rivastigmine transdermal             | EXELON PATCH |

**ANTIDEPRESSANTS**

Although these agents are primarily indicated for depression, some of these are also approved for other indications, including bipolar disorder, obsessive-compulsive disorder, panic disorder and premenstrual dysphoric disorder.

Guidelines for the evaluation and management of bipolar and depressive disorders are available at:  
<http://www.psych.org>

**Monoamine Oxidase Inhibitors (MAOIs)**

|                        |         |
|------------------------|---------|
| <b>phenelzine</b>      | NARDIL  |
| <b>tranylcypromine</b> | PARNATE |

**Selective Serotonin Reuptake Inhibitors (SSRIs)**

|                               |          |
|-------------------------------|----------|
| <b>citalopram</b>             | CELEXA   |
| <b>escitalopram</b>           | LEXAPRO  |
| <b>fluoxetine</b>             | PROZAC   |
| <b>paroxetine HCl</b>         | PAXIL    |
| <b>paroxetine HCl ext-rel</b> | PAXIL CR |
| <b>sertraline</b>             | ZOLOFT   |

**Serotonin Norepinephrine Reuptake Inhibitors (SNRIs)**

|   |            |
|---|------------|
| <b>desvenlafaxine succinate ext-rel</b> | PRISTIQ    |
| <b>duloxetine delayed-rel</b>           | CYMBALTA   |
| <b>venlafaxine</b>                      |            |
| <b>venlafaxine ext-rel</b>              | EFFEXOR XR |

**Tricyclic Antidepressants (TCAs)**

|                       |           |
|-----------------------|-----------|
| <b>amitriptyline</b>  |           |
| <b>desipramine</b>    | NORPRAMIN |
| <b>doxepin</b>        |           |
| <b>imipramine HCl</b> | TOFRANIL  |
| <b>nortriptyline</b>  | PAMELOR   |

**Miscellaneous Agents**

|   |                |
|---|----------------|
| <b>bupropion</b>                              |                |
| <b>bupropion ext-rel</b>                      | WELLBUTRIN SR  |
| <b>bupropion ext-rel</b>                      | WELLBUTRIN XL  |
| <b>mirtazapine</b>                            | REMERON        |
| <b>mirtazapine orally disintegrating tabs</b> | REMERON SOLTAB |
| <b>trazodone</b>                              |                |

**ANTIPARKINSONIAN AGENTS**

Practice guidelines for the diagnosis and treatment of Parkinson's disease are available at:

<http://www.aan.com>

|  |            |
|--|------------|
| <b>amantadine</b>                                    |            |
| <b>benztropine</b>                                   |            |
| <b>bromocriptine</b>                                 | PARLODEL   |
| <b>carbidopa/levodopa</b>                            | SINEMET    |
| <b>carbidopa/levodopa ext-rel</b>                    | SINEMET CR |
| <b>carbidopa/levodopa orally disintegrating tabs</b> |            |
| <b>carbidopa/levodopa/entacapone</b>                 | STALEVO    |
| <b>entacapone</b>                                    | COMTAN     |
| <b>pramipexole</b>                                   | MIRAPEX    |
| <b>rasagiline mesylate</b>                           | AZILECT    |
| <b>ropinirole</b>                                    | REQUIP     |
| <b>selegiline</b>                                    |            |
| <b>trihexyphenidyl</b>                               |            |

**ANTIPSYCHOTICS****Atypicals**

|  |          |
|--|----------|
| <b>aripiprazole</b>                      | ABILIFY  |
| <b>aripiprazole lauroxil ext-rel inj</b> | ARISTADA |
| <b>clozapine</b>                         | CLOZARIL |

|  |  |                 |
|--|--|-----------------|
|  | clozapine orally disintegrating tabs   | FAZACLO         |
|  | olanzapine                             | ZYPREXA         |
|  | paliperidone ext-rel                   | INVEGA          |
|  | quetiapine                             | SEROQUEL        |
|  | risperidone                            | RISPERDAL       |
|  | risperidone orally disintegrating tabs | RISPERDAL M-TAB |
|  | ziprasidone                            | GEODON          |

**Miscellaneous**

|               |                 |          |
|---------------|-----------------|----------|
|               | chlorpromazine  |          |
|               | fluphenazine    |          |
|               | haloperidol     |          |
| <b>PA, SP</b> | pimavanserin    | NUPLAZID |
|               | trifluoperazine |          |

**ATTENTION DEFICIT HYPERACTIVITY DISORDER**

Guidelines for the evaluation and management of attention deficit disorder are available at:

<http://www.aacap.org>

<http://www.aap.org>

|               |   |                    |
|---------------|---|--------------------|
| <b>QL, PA</b> | amphetamine/dextroamphetamine mixed salts         | ADDERALL           |
| <b>QL, PA</b> | amphetamine/dextroamphetamine mixed salts ext-rel | ADDERALL XR        |
| <b>QL</b>     | atomoxetine                                       | STRATTERA          |
| <b>QL, PA</b> | dexmethylphenidate                                | FOCALIN            |
| <b>QL, PA</b> | dextroamphetamine                                 |                    |
| <b>QL, PA</b> | dextroamphetamine ext-rel                         | DEXEDRINE SPANSULE |
| <b>QL, PA</b> | methylphenidate                                   |                    |
| <b>QL, PA</b> | methylphenidate ext-rel                           |                    |
| <b>QL, PA</b> | methylphenidate ext-rel                           | CONCERTA           |
| <b>QL, PA</b> | methylphenidate ext-rel                           | RITALIN LA         |

**FIBROMYALGIA**

|           |             |         |
|-----------|-------------|---------|
| <b>PA</b> | milnacipran | SAVELLA |
|-----------|-------------|---------|

**HYPNOTICS**

Practice parameters for the treatment of sleep disorders and clinical guidelines for the evaluation and management of chronic insomnia are available at:

<http://www.aasmnet.org>

**Benzodiazepines**

|           |           |          |
|-----------|-----------|----------|
| <b>QL</b> | temazepam | RESTORIL |
|-----------|-----------|----------|

**Nonbenzodiazepines**

|               |                  |           |
|---------------|------------------|-----------|
| <b>QL, PA</b> | zaleplon         | SONATA    |
| <b>QL, PA</b> | zolpidem         | AMBIEN    |
| <b>QL, PA</b> | zolpidem ext-rel | AMBIEN CR |

**MIGRAINE**

Guidelines for prevention and management of migraine headaches are available at:

<http://www.aan.com>

**Ergotamine Derivatives**

|  |                         |          |
|--|-------------------------|----------|
|  | dihydroergotamine spray | MIGRANAL |
|--|-------------------------|----------|

**Selective Serotonin Agonists**

|               |             |        |
|---------------|-------------|--------|
| <b>QL, PA</b> | naratriptan | AMERGE |
| <b>QL, PA</b> | rizatriptan | MAXALT |



|               |  |            |
|---------------|--|------------|
| <b>QL, PA</b> | <b>rizatriptan orally disintegrating tabs</b>  | MAXALT-MLT |
| <b>QL, PA</b> | <b>sumatriptan</b>                             | IMITREX    |
| <b>QL, PA</b> | <b>sumatriptan inj</b>                         | IMITREX    |
| <b>QL, PA</b> | <b>sumatriptan nasal spray</b>                 | IMITREX    |
| <b>QL, PA</b> | <b>zolmitriptan orally disintegrating tabs</b> | ZOMIG-ZMT  |
| <b>QL, PA</b> | <b>zolmitriptan tabs</b>                       | ZOMIG      |

**MOOD STABILIZERS**

|  |  |          |
|--|--|----------|
|  | <b>lithium carbonate</b>                     |          |
|  | <b>lithium carbonate ext-rel tabs 300 mg</b> | LITHOBID |
|  | <b>lithium carbonate ext-rel tabs 450 mg</b> |          |

**MOVEMENT DISORDERS**

|                   |                         |          |
|-------------------|-------------------------|----------|
| <b>PA, SP, QL</b> | <b>deutetrabenazine</b> | AUSTEDO  |
| <b>PA, SP, QL</b> | <b>tetrabenazine</b>    | XENAZINE |

**MULTIPLE SCLEROSIS AGENTS**

Practice guidelines for multiple sclerosis are available at:  
<http://www.aan.com>

|                   |                                      |           |
|-------------------|--------------------------------------|-----------|
| <b>PA, SP, QL</b> | <b>dimethyl fumarate delayed-rel</b> | TECFIDERA |
| <b>PA, SP, QL</b> | <b>fingolimod</b>                    | GILENYA   |
| <b>PA, SP, QL</b> | <b>glatiramer</b>                    | COPAXONE  |
| <b>PA, SP, QL</b> | <b>interferon beta-1a</b>            | AVONEX    |
| <b>PA, SP, QL</b> | <b>interferon beta-1a</b>            | REBIF     |
| <b>PA, SP, QL</b> | <b>interferon beta-1b</b>            | BETASERON |
| <b>PA, SP, QL</b> | <b>natalizumab</b>                   | TYSABRI   |
| <b>PA, SP, QL</b> | <b>ocrelizumab</b>                   | OCREVUS   |
| <b>PA, SP, QL</b> | <b>teriflunomide</b>                 | AUBAGIO   |

**MUSCULOSKELETAL THERAPY AGENTS**

|  |                                      |          |
|--|--------------------------------------|----------|
|  | <b>baclofen</b>                      |          |
|  | <b>cyclobenzaprine 5 mg, 10 mg</b>   |          |
|  | <b>dantrolene</b>                    | DANTRIUM |
|  | <b>methocarbamol</b>                 | ROBAXIN  |
|  | <b>orphenadrine/aspirin/caffeine</b> |          |
|  | <b>tizanidine tabs</b>               | ZANAFLEX |

**MYASTHENIA GRAVIS**

|  |                       |          |
|--|-----------------------|----------|
|  | <b>pyridostigmine</b> | MESTINON |
|--|-----------------------|----------|

**NARCOLEPSY**

|           |                    |          |
|-----------|--------------------|----------|
| <b>PA</b> | <b>armodafinil</b> | NUVIGIL  |
| <b>PA</b> | <b>modafinil</b>   | PROVIGIL |

**PSYCHOTHERAPEUTIC-MISCELLANEOUS****Opioid Antagonists**

|               |                             |        |
|---------------|-----------------------------|--------|
|               | <b>naloxone inj</b>         |        |
| <b>QL, PA</b> | <b>naloxone nasal spray</b> | NARCAN |
|               | <b>naltrexone</b>           |        |

**Partial Opioid Agonists**

|           |                      |  |
|-----------|----------------------|--|
| <b>PA</b> | <b>buprenorphine</b> |  |
|-----------|----------------------|--|

**Partial Opioid Agonist/Opioid Antagonist Combinations**

|           |  |               |
|-----------|--|---------------|
| <b>QL</b> | buprenorphine/naloxone sublingual film | SUBOXONE FILM |
| <b>QL</b> | buprenorphine/naloxone sublingual tabs |               |

**Smoking Deterrents**

Treating Tobacco Use and Dependence: 2008 Update-Clinical Practice Guideline is available at:

<http://www.ahrq.gov/professionals/clinicians-providers/guidelines-recommendations/tobacco/index.html>

|            |                         |             |
|------------|-------------------------|-------------|
|            | bupropion ext-rel       | ZYBAN       |
| <b>OTC</b> | nicotine polacrilex gum | NICORETTE   |
| <b>OTC</b> | nicotine transdermal    | NICODERM CQ |
|            | varenicline             | CHANTIX     |

**MISCELLANEOUS**

|  |          |         |
|--|----------|---------|
|  | riluzole | RILUTEK |
|--|----------|---------|

**ENDOCRINE AND METABOLIC****ACROMEGALY**

|                   |                    |                  |
|-------------------|--------------------|------------------|
| <b>PA, SP, QL</b> | lanreotide acetate | SOMATULINE DEPOT |
| <b>PA, SP, QL</b> | octreotide acetate | SANDOSTATIN      |

**ANDROGENS**

Clinical practice guidelines for the treatment of hypogonadism are available at:

<http://www.aace.com>

|  |                              |                   |
|--|------------------------------|-------------------|
|  | testosterone cypionate inj   | DEPO-TESTOSTERONE |
|  | testosterone enanthate inj   | DELATESTRYL       |
|  | testosterone gel             | FORTESTA          |
|  | testosterone gel 25 mg/2.5 g | ANDROGEL          |

**ANTIDIABETICS**

Guidelines of treatment and management of diabetes are available at:

<http://professional.diabetes.org>

**Biguanides**

|  |                   |               |
|--|-------------------|---------------|
|  | metformin         | GLUCOPHAGE    |
|  | metformin ext-rel | GLUCOPHAGE XR |

**Biguanide/Sulfonylurea Combinations**

|  |                     |          |
|--|---------------------|----------|
|  | glipizide/metformin | METAGLIP |
|--|---------------------|----------|

**Dipeptidyl Peptidase-4 (DPP-4) Inhibitors**

|               |             |           |
|---------------|-------------|-----------|
| <b>ST, PA</b> | linagliptin | TRADJENTA |
| <b>ST, PA</b> | sitagliptin | JANUVIA   |

**Dipeptidyl Peptidase-4 (DPP-4) Inhibitor/Biguanide Combinations**

|               |                               |               |
|---------------|-------------------------------|---------------|
| <b>ST, PA</b> | linagliptin/metformin         | JENTADUETO    |
| <b>ST, PA</b> | linagliptin/metformin ext-rel | JENTADUETO XR |
| <b>ST, PA</b> | sitagliptin/metformin         | JANUMET       |
| <b>ST, PA</b> | sitagliptin/metformin ext-rel | JANUMET XR    |

**Incretin Mimetic Agents**

|               |             |           |
|---------------|-------------|-----------|
| <b>ST, PA</b> | dulaglutide | TRULICITY |
| <b>ST, PA</b> | liraglutide | VICTOZA   |
| <b>ST, PA</b> | semaglutide | OZEMPIC   |

**Insulins**

|            |   |                   |
|------------|---|-------------------|
|            | insulin aspart                                  | FIASP             |
|            | insulin aspart                                  | NOVOLOG           |
|            | insulin aspart protamine 70%/insulin aspart 30% | NOVOLOG MIX 70/30 |
|            | insulin detemir                                 | LEVEMIR           |
|            | insulin glargine                                | BASAGLAR          |
| <b>OTC</b> | insulin human                                   | NOVOLIN R         |
|            | insulin human, concentrated                     | HUMULIN R U-500   |
| <b>OTC</b> | insulin isophane human                          | NOVOLIN N         |
| <b>OTC</b> | insulin isophane human 70%/regular 30%          | NOVOLIN 70/30     |

**Insulin Sensitizers**

|  |                     |       |
|--|---------------------|-------|
|  | <b>pioglitazone</b> | ACTOS |
|--|---------------------|-------|

**Insulin Sensitizer/Biguanide Combinations**

|  |                               |              |
|--|-------------------------------|--------------|
|  | <b>pioglitazone/metformin</b> | ACTOPLUS MET |
|--|-------------------------------|--------------|

**Insulin Sensitizer/Sulfonylurea Combinations**

|  |                                 |         |
|--|---------------------------------|---------|
|  | <b>pioglitazone/glimepiride</b> | DUETACT |
|--|---------------------------------|---------|

**Sodium Glucose Co-Transporter 2 (SGLT2) Inhibitors**

|               |               |          |
|---------------|---------------|----------|
| <b>ST, PA</b> | canagliflozin | INVOKANA |
| <b>ST, PA</b> | dapagliflozin | FARXIGA  |

**Sodium Glucose Co-Transporter 2 (SGLT2) Inhibitor/Biguanide Combinations**

|               |                                 |              |
|---------------|---------------------------------|--------------|
| <b>ST, PA</b> | canagliflozin/metformin         | INVOKAMET    |
| <b>ST, PA</b> | canagliflozin/metformin ext-rel | INVOKAMET XR |
| <b>ST, PA</b> | dapagliflozin/metformin ext-rel | XIGDUO XR    |

**Sulfonylureas**

|  |                              |              |
|--|------------------------------|--------------|
|  | <b>glimepiride</b>           | AMARYL       |
|  | <b>glipizide</b>             | GLUCOTROL    |
|  | <b>glipizide ext-rel</b>     | GLUCOTROL XL |
|  | <b>glyburide</b>             |              |
|  | <b>glyburide, micronized</b> | GLYNASE      |

**Supplies\***

\* A ONETOUCH blood glucose meter may be provided at no charge by the manufacturer to those individuals currently using a meter other than ONETOUCH. For more information on how to obtain a blood glucose meter, call: 1-800-588-4456.

|            |  |                                 |
|------------|--|---------------------------------|
| <b>OTC</b> | blood glucose monitoring kits, test strips | ONETOUCH kits and test strips   |
| <b>OTC</b> | insulin syringes, needles                  | BD insulin syringes and needles |
| <b>OTC</b> | lancets                                    | LANCETS                         |

**CALCIUM REGULATORS**

Guidelines of treatment and management of osteoporosis are available at:

<http://www.aace.com>

<http://www.nof.org>

**Bisphosphonates**

|  |                    |         |
|--|--------------------|---------|
|  | <b>alendronate</b> | FOSAMAX |
|  | <b>ibandronate</b> | BONIVA  |
|  | <b>risedronate</b> | ACTONEL |

**Miscellaneous**

|                   |           |        |
|-------------------|-----------|--------|
| <b>PA, SP, QL</b> | denosumab | PROLIA |
|-------------------|-----------|--------|

**CONTRACEPTIVES**

EE = ethinyl estradiol

ME = mestranol

**Monophasic***20 mcg Estrogen*

|   |                  |
|---|------------------|
| <b>drospirenone/EE 3/20</b>                   | YAZ              |
| <b>levonorgestrel/EE 0.1/20 - Lessina</b>     |                  |
| <b>norethindrone acetate/EE 1/20</b>          | LOESTRIN 1/20    |
| <b>norethindrone acetate/EE 1/20 and iron</b> | LOESTRIN FE 1/20 |

*25 mcg Estrogen*

|   |             |
|---|-------------|
| <b>norethindrone acetate/EE 0.8/25 and iron</b> | GENERESS FE |
|---|-------------|

*30 mcg Estrogen*

|   |                    |
|---|--------------------|
| <b>desogestrel/EE 0.15/30 - Apri</b>            |                    |
| <b>drospirenone/EE 3/30</b>                     | YASMIN             |
| <b>levonorgestrel/EE 0.15/30 - Levora</b>       |                    |
| <b>norethindrone acetate/EE 1.5/30</b>          | LOESTRIN 1.5/30    |
| <b>norethindrone acetate/EE 1.5/30 and iron</b> | LOESTRIN FE 1.5/30 |
| <b>norgestrel/EE 0.3/30 - Low-Ogestrel</b>      |                    |

*35 mcg Estrogen*

|  |                  |
|--|------------------|
| <b>ethynodiol diacetate/EE 1/35 - Zovia 1/35</b> |                  |
| <b>norethindrone/EE 0.5/35</b>                   | BREVICON         |
| <b>norethindrone/EE 1/35</b>                     | ORTHO-NOVUM 1/35 |
| <b>norgestimate/EE 0.25/35</b>                   | ORTHO-CYCLEN     |

*50 mcg Estrogen*

|  |  |
|--|--|
| <b>ethynodiol diacetate/EE 1/50 - Zovia 1/50</b> |  |
| <b>norethindrone/ME 1/50</b>                     |  |

**Biphasic**

|                       |          |
|-----------------------|----------|
| <b>desogestrel/EE</b> | MIRCETTE |
|-----------------------|----------|

**Triphasic**

|                                    |                   |
|------------------------------------|-------------------|
| <b>desogestrel/EE</b>              | CYCLESSA          |
| <b>levonorgestrel/EE - Trivora</b> |                   |
| <b>norethindrone/EE</b>            | ORTHO-NOVUM 7/7/7 |
| <b>norethindrone/EE</b>            | TRI-NORINYL       |
| <b>norgestimate/EE</b>             | ORTHO TRI-CYCLEN  |

**Extended Cycle**

|  |  |
|--|--|
| <b>levonorgestrel/EE 0.15/30 - Jolessa</b> |  |
|--|--|

**Progestin Only**

|                      |                |
|----------------------|----------------|
| <b>norethindrone</b> | ORTHO MICRONOR |
|----------------------|----------------|

**Emergency Contraception**

|  |                 |
|--|-----------------|
| <b>levonorgestrel 0.75 mg</b>                |                 |
| <b>levonorgestrel - Next Choice One Dose</b> | PLAN B ONE-STEP |
| <b>ulipristal</b>                            | ELLA            |

**Injectable**

|  |              |
|--|--------------|
| <b>medroxyprogesterone acetate 150 mg/mL</b> | DEPO-PROVERA |
|--|--------------|

|   |   |                        |
|---|---|------------------------|
| <b>Transdermal</b>  |   |                        |
|   | <b>norelgestromin/EE - Xulane</b>                               |                        |
| <b>Vaginal</b>  |   |                        |
|   | etonogestrel/EE ring  | NUVARING               |
| <b>ENDOMETRIOSIS</b>  |   |                        |
|   | <b>danazol</b>  |                        |
|   | nafarelin   | SYNAREL                |
| <b>ESTROGENS</b>  |   |                        |
| Guidelines of treatment and management of hormone therapy and menopause are available at:       |   |                        |
| <a href="http://www.menopause.org">http://www.menopause.org</a>                                 |   |                        |
| <a href="https://www.aace.com/files/menopause.pdf">https://www.aace.com/files/menopause.pdf</a> |   |                        |
| <b>Oral</b>   |   |                        |
|   | <b>estradiol</b>  | ESTRACE                |
|   | <b>estropipate</b>  |                        |
| <b>Transdermal</b>  |   |                        |
|   | <b>estradiol</b>  | CLIMARA                |
| <b>Vaginal</b>  |   |                        |
|   | <b>estradiol vaginal crm</b>                                    | ESTRACE                |
| <b>ESTROGEN/PROGESTINS</b>  |   |                        |
| <b>Oral</b>   |   |                        |
|   | <b>EE/norethindrone acetate</b>                                 | FEMHRT                 |
|   | <b>EE/norethindrone acetate - Jinteli</b>                       |                        |
|   | <b>estradiol/norethindrone</b>                                  |                        |
| <b>Transdermal</b>  |   |                        |
|   | estradiol/levonorgestrel  | CLIMARA PRO            |
| <b>FERTILITY REGULATORS</b>   |   |                        |
| <b>Ovulation Stimulants, Gonadotropins</b>  |   |                        |
| <b>PA, SP, QL</b>   | follitropin alfa  | GONAL-F                |
| <b>GAUCHER DISEASE</b>  |   |                        |
| <b>PA, SP, QL</b>   | eliglustat  | CERDELGA               |
| <b>PA, SP, QL</b>   | imiglucerase  | CEREZYME               |
| <b>GLUCOCORTICOIDS</b>  |   |                        |
|   | <b>dexamethasone</b>  |                        |
|   | <b>fludrocortisone</b>  |                        |
|   | <b>hydrocortisone</b>   | CORTEF                 |
|   | <b>methylprednisolone</b>                                       | MEDROL                 |
|   | <b>prednisolone sodium phosphate</b>                            |                        |
|   | <b>prednisolone sodium phosphate orally disintegrating tabs</b> | ORAPRED ODT            |
|   | <b>prednisolone syrup</b>                                       | PRELONE                |
|   | <b>prednisone</b>   |                        |
| <b>GLUCOSE ELEVATING AGENTS</b>   |   |                        |
|   | glucagon, human recombinant                                     | GLUCAGEN HYPOKIT       |
|   | glucagon, human recombinant                                     | GLUCAGON EMERGENCY KIT |

**HEREDITARY TYROSINEMIA TYPE 1 AGENTS****Metabolic Modifiers**

|               |            |       |
|---------------|------------|-------|
| <b>PA, SP</b> | nitisinone | NITYR |
|---------------|------------|-------|

**HUMAN GROWTH HORMONES**

Guidelines for use of growth hormone are available at:

<http://www.aace.com/publications/guidelines>

|               |            |           |
|---------------|------------|-----------|
| <b>PA, SP</b> | somatropin | HUMATROPE |
|---------------|------------|-----------|

**HYPERPARATHYROID TREATMENT, VITAMIN D ANALOGS**

|  |                      |           |
|--|----------------------|-----------|
|  | calcitriol (1,25-D3) | ROCALTROL |
|  | doxercalciferol      | HECTOROL  |
|  | paricalcitol         | ZEMPLAR   |

**PHOSPHATE BINDER AGENTS**

|  |                     |        |
|--|---------------------|--------|
|  | calcium acetate     | PHOSLO |
|  | sevelamer carbonate | REVELA |

**PROGESTINS****Oral**

|  |                             |            |
|--|-----------------------------|------------|
|  | medroxyprogesterone acetate | PROVERA    |
|  | norethindrone acetate       | AYGESTIN   |
|  | progesterone, micronized    | PROMETRIUM |

**Vaginal**

|  |                              |            |
|--|------------------------------|------------|
|  | progesterone vaginal inserts | ENDOMETRIN |
|--|------------------------------|------------|

**SELECTIVE ESTROGEN RECEPTOR MODULATORS**

|  |            |         |
|--|------------|---------|
|  | ospemifene | OSPHENA |
|  | raloxifene | EVISTA  |

**THYROID AGENTS****Antithyroid Agents**

|  |                  |          |
|--|------------------|----------|
|  | methimazole      | TAPAZOLE |
|  | propylthiouracil |          |

**Thyroid Supplements**

|  |                         |           |
|--|-------------------------|-----------|
|  | levothyroxine           |           |
|  | levothyroxine           | SYNTHROID |
|  | levothyroxine - Levoxyl |           |

**VASOPRESSINS**

|  |                          |       |
|--|--------------------------|-------|
|  | desmopressin nasal spray | DDAVP |
|  | desmopressin tabs        | DDAVP |

**MISCELLANEOUS**

|               |             |          |
|---------------|-------------|----------|
|               | cabergoline |          |
| <b>PA, SP</b> | cysteamine  | CYSTAGON |

**GASTROINTESTINAL**

Guidelines for the treatment and management of various gastrointestinal diseases/conditions are available at:

<http://gi.org>

<http://www.gastro.org>

**ANTIDIARRHEALS**

|  |                        |         |
|--|------------------------|---------|
|  | diphenoxylate/atropine | LOMOTIL |
|  | loperamide             |         |

**ANTIEMETICS**

|               |  |            |
|---------------|--|------------|
| <b>QL, PA</b> | aprepitant                             | EMEND      |
|               | dronabinol                             | MARINOL    |
|               | granisetron                            |            |
|               | meclizine                              |            |
|               | metoclopramide                         | REGLAN     |
|               | ondansetron                            | ZOFRAN     |
|               | ondansetron orally disintegrating tabs | ZOFRAN ODT |
|               | prochlorperazine                       |            |
|               | promethazine                           |            |
|               | trimethobenzamide                      | TIGAN      |

**ANTISPASMODICS**

|  |  |         |
|--|--|---------|
|  | dicyclomine                                    | BENTYL  |
|  | hyoscyamine sulfate                            | LEVSIN  |
|  | hyoscyamine sulfate ext-rel                    | LEVBIID |
|  | hyoscyamine sulfate ext-rel caps               |         |
|  | hyoscyamine sulfate orally disintegrating tabs |         |

**CHOLELITHOLYTICS**

|  |          |          |
|--|----------|----------|
|  | ursodiol | ACTIGALL |
|  | ursodiol | URSO     |

**H<sub>2</sub> RECEPTOR ANTAGONISTS**

|            |            |            |
|------------|------------|------------|
|            | cimetidine |            |
| <b>OTC</b> | cimetidine | TAGAMET HB |
|            | famotidine | PEPCID     |
| <b>OTC</b> | famotidine | PEPCID AC  |
|            | ranitidine | ZANTAC     |
| <b>OTC</b> | ranitidine | ZANTAC     |

**INFLAMMATORY BOWEL DISEASE****Oral Agents**

|  |                             |                    |
|--|-----------------------------|--------------------|
|  | balsalazide                 |                    |
|  | budesonide delayed-rel caps | ENTOCORT EC        |
|  | mesalamine delayed-rel      | LIALDA             |
|  | mesalamine ext-rel caps     | APRISO             |
|  | sulfasalazine               | AZULFIDINE         |
|  | sulfasalazine delayed-rel   | AZULFIDINE EN-TABS |

**Rectal Agents**

|  |                        |        |
|--|------------------------|--------|
|  | hydrocortisone enema   |        |
|  | mesalamine rectal susp | ROWASA |

**IRRITABLE BOWEL SYNDROME****Irritable Bowel Syndrome with Constipation**

|  |              |         |
|--|--------------|---------|
|  | linaclotide  | LINZESS |
|  | lubiprostone | AMITIZA |

**Irritable Bowel Syndrome with Diarrhea**

|           |             |          |
|-----------|-------------|----------|
|           | alosetron   | LOTROXEX |
| <b>PA</b> | eluxadoline | VIBERZI  |

**LAXATIVES**

|  |        |
|--|--------|
| <b>lactulose</b>                                   |        |
| <b>peg 3350/electrolytes</b>                       |        |
| <b>polyethylene glycol 3350</b>                    |        |
| sodium sulfate/potassium sulfate/magnesium sulfate | SUPREP |

**OPIOID-INDUCED CONSTIPATION**

|           |          |
|-----------|----------|
| naloxegol | MOVANTIK |
|-----------|----------|

**PANCREATIC ENZYMES**

|                          |         |
|--------------------------|---------|
| pancrelipase             | VIOKACE |
| pancrelipase delayed-rel | CREON   |
| pancrelipase delayed-rel | ZENPEP  |

**PROSTAGLANDINS**

|                    |         |
|--------------------|---------|
| <b>misoprostol</b> | CYTOTEC |
|--------------------|---------|

**PROTON PUMP INHIBITORS**

|   |                  |
|---|------------------|
| <b>lansoprazole</b>                         | PREVACID         |
| lansoprazole soluble tabs                   | PREVACID SOLUTAB |
| <b>omeprazole delayed-rel</b>               | PRILOSEC         |
| omeprazole granules                         | PRILOSEC         |
| <b>OTC</b> omeprazole magnesium delayed-rel | PRILOSEC OTC     |
| <b>OTC</b> omeprazole/sodium bicarbonate    | ZEGERID OTC      |
| <b>pantoprazole delayed-rel</b>             | PROTONIX         |

**SALIVA STIMULANTS**

|                         |         |
|-------------------------|---------|
| <b>pilocarpine tabs</b> | SALAGEN |
|-------------------------|---------|

**STEROIDS, RECTAL**

|                           |           |
|---------------------------|-----------|
| <b>hydrocortisone crm</b> | ANUSOL-HC |
|---------------------------|-----------|

**MISCELLANEOUS**

|                          |         |
|--------------------------|---------|
| <b>AL</b> glycopyrrolate | CUVPOSA |
|--------------------------|---------|

**GENITOURINARY****BENIGN PROSTATIC HYPERPLASIA**

Guidelines for the management of BPH are available at:

<http://www.auanet.org/guidelines>

|                          |           |
|--------------------------|-----------|
| <b>alfuzosin ext-rel</b> | UROXATRAL |
| <b>doxazosin</b>         | CARDURA   |
| <b>finasteride</b>       | PROSCAR   |
| <b>tamsulosin</b>        | FLOMAX    |
| <b>terazosin</b>         |           |

**URINARY ANTISPASMODICS**

|                           |             |
|---------------------------|-------------|
| <b>oxybutynin</b>         |             |
| <b>oxybutynin ext-rel</b> | DITROPAN XL |
| <b>trospium</b>           |             |

**VAGINAL ANTI-INFECTIVES**

|                        |                  |
|------------------------|------------------|
| <b>clindamycin crm</b> | CLEOCIN          |
| <b>metronidazole</b>   | METROGEL-VAGINAL |
| <b>terconazole</b>     | TERAZOL 3        |
| <b>terconazole</b>     | TERAZOL 7        |



**MISCELLANEOUS**

|  |                                  |            |
|--|----------------------------------|------------|
|  | <b>bethanechol</b>               | URECHOLINE |
|  | <b>potassium citrate ext-rel</b> | UROCIT-K   |

**HEMATOLOGIC****ANTICOAGULANTS**

CHEST guidelines are available at:

<http://www.chestnet.org/Guidelines-and-Resources/Guidelines-and-Consensus-Statements/Antithrombotic-Guidelines-9th-Ed>**Injectable**

|  |                   |         |
|--|-------------------|---------|
|  | <b>enoxaparin</b> | LOVENOX |
|--|-------------------|---------|

**Oral**

|  |                    |          |
|--|--------------------|----------|
|  | <b>rivaroxaban</b> | XARELTO  |
|  | <b>warfarin</b>    | COUMADIN |

**Synthetic Heparinoid-like Agents**

|  |                     |         |
|--|---------------------|---------|
|  | <b>fondaparinux</b> | ARIXTRA |
|--|---------------------|---------|

**HEMATOPOIETIC GROWTH FACTORS**

|               |                         |         |
|---------------|-------------------------|---------|
| <b>PA, SP</b> | <b>darbepoetin alfa</b> | ARANESP |
| <b>PA, SP</b> | <b>filgrastim-sndz</b>  | ZARXIO  |

**HEMOPHILIA AGENTS**

|               |   |             |
|---------------|---|-------------|
| <b>PA, SP</b> | <b>antihemophilic factor (recombinant)</b>                  | KOGENATE FS |
| <b>PA, SP</b> | <b>antihemophilic factor (recombinant)</b>                  | KOVALTRY    |
| <b>PA, SP</b> | <b>antihemophilic factor (recombinant)</b>                  | NOVOEIGHT   |
| <b>PA, SP</b> | <b>human coagulation factor VIII (rDNA) simoctocog alfa</b> | NUWIQ       |

**HEREDITARY ANGIOEDEMA AGENTS**

|               |   |          |
|---------------|---|----------|
| <b>PA, SP</b> | <b>C1 esterase inhibitor, recombinant</b> | RUCONEST |
|---------------|---|----------|

**PLATELET AGGREGATION INHIBITORS**

|  |                                     |           |
|--|-------------------------------------|-----------|
|  | <b>clopidogrel</b>                  | PLAVIX    |
|  | <b>dipyridamole</b>                 |           |
|  | <b>dipyridamole ext-rel/aspirin</b> | AGGRENOX  |
|  | <b>prasugrel</b>                    | EFFIENT   |
|  | <b>ticagrelor</b>                   | BRILINTA  |
|  | <b>vorapaxar</b>                    | ZONTIVITY |

**PLATELET SYNTHESIS INHIBITORS**

|  |                   |         |
|--|-------------------|---------|
|  | <b>anagrelide</b> | AGRYLIN |
|--|-------------------|---------|

**MISCELLANEOUS**

|            |                   |  |
|------------|-------------------|--|
| <b>OTC</b> | <b>aspirin</b>    |  |
|            | <b>cilostazol</b> |  |

**IMMUNOLOGIC AGENTS****AUTOIMMUNE AGENTS****Ankylosing Spondylitis**

|                   |                    |          |
|-------------------|--------------------|----------|
| <b>PA, SP, QL</b> | <b>adalimumab</b>  | HUMIRA   |
| <b>PA, SP, QL</b> | <b>etanercept</b>  | ENBREL   |
| <b>PA, SP, QL</b> | <b>secukinumab</b> | COSENTYX |

**Crohn's Disease**

|                       |              |        |
|-----------------------|--------------|--------|
| <b>PA, SP, QL</b>     | adalimumab   | HUMIRA |
| <b>##, PA, SP, QL</b> | certolizumab | CIMZIA |

**##** After failure of HUMIRA

**Psoriasis**

|                       |                          |         |
|-----------------------|--------------------------|---------|
| <b>PA, SP, QL</b>     | adalimumab               | HUMIRA  |
| <b>##, PA, SP, QL</b> | ixekizumab               | TALTZ   |
| <b>##, PA, SP, QL</b> | ustekinumab subcutaneous | STELARA |

**##** After failure of HUMIRA

**Psoriatic Arthritis**

|                   |             |          |
|-------------------|-------------|----------|
| <b>PA, SP, QL</b> | adalimumab  | HUMIRA   |
| <b>PA, SP, QL</b> | apremilast  | OTEZLA   |
| <b>PA, SP, QL</b> | etanercept  | ENBREL   |
| <b>PA, SP, QL</b> | secukinumab | COSENTYX |

**Rheumatoid Arthritis**

|                   |                        |                   |
|-------------------|------------------------|-------------------|
| <b>PA, SP, QL</b> | abatacept              | ORENCIA CLICKJECT |
| <b>PA, SP, QL</b> | abatacept subcutaneous | ORENCIA           |
| <b>PA, SP, QL</b> | adalimumab             | HUMIRA            |
| <b>PA, SP, QL</b> | etanercept             | ENBREL            |
| <b>PA, SP, QL</b> | sarilumab              | KEVZARA           |

**Ulcerative Colitis**

|                       |            |         |
|-----------------------|------------|---------|
| <b>PA, SP, QL</b>     | adalimumab | HUMIRA  |
| <b>##, PA, SP, QL</b> | golimumab  | SIMPONI |

**##** After failure of HUMIRA

**All Other Conditions**

|                   |            |        |
|-------------------|------------|--------|
| <b>PA, SP, QL</b> | adalimumab | HUMIRA |
| <b>PA, SP, QL</b> | etanercept | ENBREL |

**DISEASE-MODIFYING ANTIRHEUMATIC DRUGS (DMARDs)**

Guidelines for the management of rheumatic diseases are available at:

<http://www.rheumatology.org>

|                   |                           |           |
|-------------------|---------------------------|-----------|
|                   | <b>hydroxychloroquine</b> | PLAQUENIL |
|                   | <b>leflunomide</b>        | ARAVA     |
|                   | <b>methotrexate</b>       |           |
| <b>PA, SP, QL</b> | methotrexate              | RASUVO    |

**IMMUNOSUPPRESSANTS****Antimetabolites**

|  |                              |          |
|--|------------------------------|----------|
|  | <b>azathioprine</b>          | IMURAN   |
|  | <b>mycophenolate mofetil</b> | CELLCEPT |

**Calcineurin Inhibitors**

|  |                               |            |
|--|-------------------------------|------------|
|  | <b>cyclosporine</b>           | SANDIMMUNE |
|  | <b>cyclosporine, modified</b> | NEORAL     |
|  | <b>tacrolimus</b>             | PROGRAF    |

**Rapamycin Derivatives**

|  |            |          |
|--|------------|----------|
|  | everolimus | ZORTRESS |
|  | sirolimus  | RAPAMUNE |

**NUTRITIONAL/SUPPLEMENTS****ELECTROLYTES****Potassium**

|  |                            |       |
|--|----------------------------|-------|
|  | potassium chloride ext-rel |       |
|  | potassium chloride ext-rel | K-TAB |
|  | potassium chloride liquid  |       |

**VITAMINS AND MINERALS****Folic Acid**

|  |            |  |
|--|------------|--|
|  | folic acid |  |
|--|------------|--|

**Prenatal Vitamins**

|  |                           |  |
|--|---------------------------|--|
|  | prenatal vitamin/minerals |  |
|--|---------------------------|--|

**Miscellaneous**

|            |   |          |
|------------|---|----------|
|            | cyanocobalamin inj                      |          |
|            | ergocalciferol (D2)                     |          |
| <b>OTC</b> | ferrous sulfate                         |          |
|            | fluoride drops, tabs                    |          |
|            | multivitamins/fluoride drops, tabs      |          |
|            | multivitamins/fluoride/iron drops, tabs |          |
|            | phytonadione                            | MEPHYTON |
|            | vitamin ADC/fluoride drops              |          |
|            | vitamin ADC/fluoride/iron drops         |          |

**RESPIRATORY**

Guidelines to the management, prevention, or treatment of COPD and asthma are available at:

<http://www.aaaai.org>

<http://www.ginasthma.com>

<http://www.goldcopd.com>

<http://www.nhlbi.nih.gov>

The Allergy Report and guidelines for allergy-related conditions are available at:

<http://www.aaaai.org>

**ALPHA-1 ANTITRYPSIN DEFICIENCY**

|               |                              |             |
|---------------|------------------------------|-------------|
| <b>PA, SP</b> | alpha-1 proteinase inhibitor | PROLASTIN-C |
|---------------|------------------------------|-------------|

**ANAPHYLAXIS TREATMENT AGENTS**

|  |                           |           |
|--|---------------------------|-----------|
|  | epinephrine               | EPIPEN    |
|  | epinephrine               | EPIPEN JR |
|  | epinephrine auto-injector |           |

**ANTICHOLINERGICS**

|           |                                 |                 |
|-----------|---------------------------------|-----------------|
|           | ipratropium inhalation solution |                 |
| <b>QL</b> | umeclidinium                    | INCRUSE ELLIPTA |

**ANTICHOLINERGIC/BETA AGONIST COMBINATIONS****Short Acting**

|  |   |                    |
|--|---|--------------------|
|  | ipratropium/albuterol soln              |                    |
|  | ipratropium/albuterol, CFC-free aerosol | COMBIVENT RESPIMAT |

**Long Acting**

|           |                           |                    |
|-----------|---------------------------|--------------------|
| <b>QL</b> | glycopyrrolate/formoterol | BEVESPI AEROSPHERE |
|-----------|---------------------------|--------------------|

**ANTIHIISTAMINES, LOW SEDATING**

|            |            |        |
|------------|------------|--------|
| <b>OTC</b> | cetirizine | ZYRTEC |
|------------|------------|--------|

**ANTIHIISTAMINES, NONSEDATING**

|            |                                       |                   |
|------------|---------------------------------------|-------------------|
| <b>OTC</b> | fexofenadine                          | ALLEGRA           |
| <b>OTC</b> | loratadine                            | CLARITIN          |
| <b>OTC</b> | loratadine orally disintegrating tabs | CLARITIN REDITABS |

**ANTIHIISTAMINES, SEDATING**

|  |                 |  |
|--|-----------------|--|
|  | ciproheptadine  |  |
|  | hydroxyzine HCl |  |

**ANTIHIISTAMINE/DECONGESTANT COMBINATIONS**

|            |                                      |                  |
|------------|--------------------------------------|------------------|
| <b>OTC</b> | cetirizine/pseudoephedrine ext-rel   | ZYRTEC-D 12 HOUR |
| <b>OTC</b> | fexofenadine/pseudoephedrine ext-rel | ALLEGRA-D        |
| <b>OTC</b> | loratadine/pseudoephedrine ext-rel   | CLARITIN-D       |

**ANTITUSSIVES**

Clinical practice guidelines are available at:

<http://journal.publications.chestnet.org/article.aspx?articleID=1084267>

|  |             |          |
|--|-------------|----------|
|  | benzonatate | TESSALON |
|--|-------------|----------|

**ANTITUSSIVE COMBINATIONS****Opioid**

|  |  |  |
|--|--|--|
|  | codeine/chlorpheniramine/pseudoephedrine |  |
|  | codeine/guaifenesin liquid               |  |
|  | codeine/promethazine                     |  |
|  | codeine/promethazine/phenylephrine       |  |
|  | hydrocodone/homatropine                  |  |

**Non-opioid**

|  |                               |  |
|--|-------------------------------|--|
|  | dextromethorphan/promethazine |  |
|--|-------------------------------|--|

**BETA AGONISTS****Inhalants****Short Acting**

|           |   |                   |
|-----------|---|-------------------|
|           | albuterol inhalation soln                         |                   |
|           | albuterol inhalation soln                         | ACCUNEB           |
| <b>QL</b> | albuterol sulfate aerosol powder breath-activated | PROAIR RESPICLICK |
| <b>QL</b> | albuterol sulfate, CFC-free aerosol               | PROAIR HFA        |
|           | levalbuterol nebulizer soln concentrate           | XOPENEX SOLUTION  |

**Long Acting****Hand-held Active Inhalation**

|           |                              |                    |
|-----------|------------------------------|--------------------|
| <b>QL</b> | olodaterol, CFC-free aerosol | STRIVERDI RESPIMAT |
|-----------|------------------------------|--------------------|

**Nebulized Passive Inhalation**

|           |                            |             |
|-----------|----------------------------|-------------|
| <b>QL</b> | formoterol inhalation soln | PERFOROMIST |
|-----------|----------------------------|-------------|

**CYSTIC FIBROSIS**

|                   |                                    |          |
|-------------------|------------------------------------|----------|
| <b>PA, SP, QL</b> | ivacaftor                          | KALYDECO |
| <b>PA, SP, QL</b> | lumacaftor/ivacaftor               | ORKAMBI  |
| <b>PA, SP, QL</b> | tezacaftor/ivacaftor and ivacaftor | SYMDEKO  |

|                   |                                   |             |
|-------------------|-----------------------------------|-------------|
| <b>PA, SP, QL</b> | tobramycin inhalation soln        | BETHKIS     |
| <b>PA, SP, QL</b> | <b>tobramycin inhalation soln</b> | KITABIS PAK |
| <b>PA, SP, QL</b> | <b>tobramycin inhalation soln</b> | TOBI        |

**LEUKOTRIENE RECEPTOR ANTAGONISTS**

|                    |           |
|--------------------|-----------|
| <b>montelukast</b> | SINGULAIR |
|--------------------|-----------|

**NASAL ANTIHISTAMINES**

|                         |         |
|-------------------------|---------|
| <b>azelastine spray</b> | ASTELIN |
| <b>azelastine spray</b> | ASTEPRO |

**NASAL STEROIDS**

|                          |  |
|--------------------------|--|
| <b>flunisolide spray</b> |  |
| <b>fluticasone spray</b> |  |

**PULMONARY FIBROSIS AGENTS**

|                   |             |         |
|-------------------|-------------|---------|
| <b>PA, SP, QL</b> | pirfenidone | ESBRIET |
|-------------------|-------------|---------|

**STEROID/BETA AGONIST COMBINATIONS**

|           |  |            |
|-----------|--|------------|
| <b>QL</b> | budesonide/formoterol                    | SYMBICORT  |
| <b>QL</b> | fluticasone/salmeterol                   | ADVAIR     |
| <b>QL</b> | fluticasone/salmeterol, CFC-free aerosol | ADVAIR HFA |

**STEROID INHALANTS**

|           |  |                    |
|-----------|--|--------------------|
| <b>QL</b> | beclomethasone, CFC-free aerosol         | QVAR               |
| <b>QL</b> | <b>budesonide inh susp</b>               | PULMICORT RESPULES |
| <b>QL</b> | fluticasone furoate                      | ARNUITY ELLIPTA    |
| <b>QL</b> | fluticasone propionate                   | FLOVENT DISKUS     |
| <b>QL</b> | fluticasone propionate, CFC-free aerosol | FLOVENT HFA        |

**XANTHINES**

|                                  |  |
|----------------------------------|--|
| <b>theophylline ext-rel tabs</b> |  |
|----------------------------------|--|

**MISCELLANEOUS**

|                          |  |
|--------------------------|--|
| <b>ipratropium spray</b> |  |
|--------------------------|--|

**TOPICAL****DERMATOLOGY****Acne**

Guidelines for the care and treatment of acne vulgaris are available at:

<http://www.aad.org/education-and-quality-care/clinical-guidelines>

*Oral*

|                                |  |
|--------------------------------|--|
| <b>isotretinoin - Claravis</b> |  |
|--------------------------------|--|

*Topical*

|                                      |            |
|--------------------------------------|------------|
| <b>benzoyl peroxide crm, lotion</b>  |            |
| <b>clindamycin gel, lotion, soln</b> | CLEOCIN T  |
| <b>erythromycin gel 2%</b>           |            |
| <b>erythromycin soln</b>             |            |
| <b>erythromycin/benzoyl peroxide</b> | BENZAMYCIN |
| <b>sulfacetamide lotion 10%</b>      | KLARON     |
| <b>tretinoin</b>                     | AVITA      |
| <b>tretinoin</b>                     | RETIN-A    |

**Actinic Keratosis**

|  |                                 |        |
|--|---------------------------------|--------|
|  | fluorouracil crm 4%             | TOLAK  |
|  | <b>fluorouracil crm 5%</b>      |        |
|  | <b>fluorouracil soln 2%, 5%</b> |        |
|  | <b>imiquimod crm</b>            | ALDARA |

**Antibiotics**

|  |                            |           |
|--|----------------------------|-----------|
|  | <b>gentamicin</b>          |           |
|  | <b>mupirocin</b>           | BACTROBAN |
|  | <b>silver sulfadiazine</b> | SILVADENE |

**Antifungals**

|  |                     |        |
|--|---------------------|--------|
|  | <b>ciclopirox</b>   | LOPROX |
|  | <b>clotrimazole</b> |        |
|  | <b>econazole</b>    |        |
|  | <b>ketoconazole</b> |        |
|  | <b>nystatin</b>     |        |

**Antipsoriatics**

Guidelines of care for the management and treatment of psoriasis with topical therapies are available at:

<http://www.aad.org>

*Topical*

|  |                      |         |
|--|----------------------|---------|
|  | <b>calcipotriene</b> | DOVONEX |
|--|----------------------|---------|

**Antiseborrheics**

|  |                                      |                 |
|--|--------------------------------------|-----------------|
|  | <b>ketoconazole shampoo 2%</b>       | NIZORAL SHAMPOO |
|  | <b>selenium sulfide shampoo 2.5%</b> |                 |

**Atopic Dermatitis**

Guidelines for the treatment of atopic dermatitis are available at:

<http://www.aad.org/education/clinical-guidelines>

*Injectable*

|                   |                  |          |
|-------------------|------------------|----------|
| <b>PA, SP, QL</b> | <b>dupilumab</b> | DUPIXENT |
|-------------------|------------------|----------|

*Topical*

|  |                     |          |
|--|---------------------|----------|
|  | <b>pimecrolimus</b> | ELIDEL   |
|  | <b>tacrolimus</b>   | PROTOPIC |

**Corticosteroids***Low Potency*

|               |  |         |
|---------------|--|---------|
| <b>QL, PA</b> | <b>alclometasone crm, oint 0.05%</b>     |         |
| <b>QL, PA</b> | <b>desonide crm, lotion, oint 0.05%</b>  | DESOWEN |
|               | <b>fluocinolone acetonide soln 0.01%</b> |         |
|               | <b>hydrocortisone crm 2.5%</b>           |         |
| <b>OTC</b>    | <b>hydrocortisone lotion 1%</b>          |         |

*Medium Potency*

|               |  |          |
|---------------|--|----------|
| <b>QL, PA</b> | <b>betamethasone valerate crm, lotion, oint 0.1%</b> |          |
| <b>QL, PA</b> | <b>desoximetasone crm 0.05%</b>                      |          |
| <b>QL, PA</b> | <b>fluocinolone acetonide crm, oint 0.025%</b>       |          |
| <b>QL, PA</b> | <b>fluticasone propionate crm 0.05%, oint 0.005%</b> | CUTIVATE |
| <b>QL, PA</b> | <b>hydrocortisone butyrate crm, oint 0.1%</b>        | LOCOID   |
|               | <b>hydrocortisone butyrate soln 0.1%</b>             | LOCOID   |
| <b>QL, PA</b> | <b>hydrocortisone valerate crm, oint 0.2%</b>        | WESTCORT |
| <b>QL, PA</b> | <b>mometasone crm, lotion, oint 0.1%</b>             | ELOCON   |

|  |  |                     |
|--|--|---------------------|
|  | triamcinolone acetonide crm, lotion 0.025%           |                     |
|  | triamcinolone acetonide crm, lotion, oint 0.1%       |                     |
| <i>High Potency</i>  |  |                     |
| <b>QL, PA</b>  | amcinonide crm, lotion, oint 0.1%                    |                     |
| <b>QL, PA</b>  | betamethasone dipropionate augmented crm 0.05%       | DIPROLENE AF        |
| <b>QL, PA</b>  | betamethasone dipropionate augmented lotion 0.05%    | DIPROLENE           |
| <b>QL, PA</b>  | betamethasone dipropionate crm, lotion, oint 0.05%   |                     |
| <b>QL, PA</b>  | desoximetasone crm, oint 0.25%, gel 0.05%            | TOPICORT            |
| <b>QL, PA</b>  | diflorasone diacetate crm 0.05%                      |                     |
| <b>QL, PA</b>  | fluocinonide crm, gel, oint 0.05%                    |                     |
|  | fluocinonide soln 0.05%                              |                     |
|  | triamcinolone acetonide crm 0.5%                     |                     |
| <i>Very High Potency</i>   |  |                     |
| <b>QL, PA</b>  | betamethasone dipropionate augmented gel, oint 0.05% | DIPROLENE           |
| <b>QL, PA</b>  | clobetasol propionate crm, gel, oint 0.05%           | TEMOVATE            |
|  | clobetasol propionate foam 0.05%                     | OLUX                |
| <b>QL, PA</b>  | clobetasol propionate lotion 0.05%                   | CLOBEX              |
| <b>QL, PA</b>  | diflorasone diacetate oint 0.05%                     |                     |
| <b>QL, PA</b>  | halobetasol propionate crm, oint 0.05%               | ULTRAVATE           |
| <i>Emollients</i>  |  |                     |
|  | ammonium lactate 12%                                 | LAC-HYDRIN          |
| <i>Rosacea</i>   |  |                     |
|  | metronidazole crm 0.75%                              | METROCREAM          |
|  | metronidazole gel 0.75%                              |                     |
|  | metronidazole lotion 0.75%                           | METROLOTION         |
| <i>Scabicides and Pediculicides</i>  |  |                     |
|  | malathion  | OVIDE               |
| <b>OTC</b>   | permethrin   | NIX                 |
|  | permethrin 5%  |                     |
| <b>OTC</b>   | pyrethrins/piperonyl butoxide                        | GOOD SENSE COMPLETE |
| <b>OTC</b>   | pyrethrins/piperonyl butoxide                        | RID                 |
| <b>MOUTH/THROAT/DENTAL AGENTS</b>  |  |                     |
| <i>Anesthetics - Topical Oral</i>  |  |                     |
|  | lidocaine viscous                                    |                     |
| <i>Steroids - Mouth/Throat</i>   |  |                     |
|  | triamcinolone paste                                  |                     |
| <b>OPHTHALMIC</b>  |  |                     |
| Preferred Practice Pattern Guidelines for the treatment of various ophthalmic conditions are available at: |  |                     |
| <a href="http://one.aao.org">http://one.aao.org</a>  |  |                     |
| <i>Antiallergics</i>   |  |                     |
|  | azelastine   |                     |
|  | cromolyn sodium                                      |                     |
| <b>OTC</b>   | ketotifen  | ZADITOR             |
| <i>Antifungals</i>   |  |                     |
|  | natamycin  | NATACYN             |

**Anti-infectives**

|  |           |
|--|-----------|
| <b>bacitracin</b>                      |           |
| <b>ciprofloxacin</b>                   | CILOXAN   |
| <b>erythromycin</b>                    |           |
| <b>gentamicin</b>                      |           |
| moxifloxacin                           | VIGAMOX   |
| <b>neomycin/polymyxin B/gramicidin</b> | NEOSPORIN |
| <b>ofloxacin</b>                       | OCUFLOX   |
| <b>polymyxin B/bacitracin</b>          |           |
| <b>polymyxin B/trimethoprim</b>        | POLYTRIM  |
| <b>sulfacetamide soln 10%</b>          | BLEPH-10  |
| <b>tobramycin</b>                      | TOBREX    |

**Anti-infective/Anti-inflammatory Combinations**

|  |                     |
|--|---------------------|
| <b>neomycin/polymyxin B/bacitracin/hydrocortisone oint</b> |                     |
| <b>neomycin/polymyxin B/dexamethasone</b>                  | MAXITROL            |
| <b>neomycin/polymyxin B/hydrocortisone susp</b>            |                     |
| <b>sulfacetamide/prednisolone phosphate</b>                |                     |
| <b>tobramycin/dexamethasone susp 0.3%/0.1%</b>             | TOBRADEX SUSPENSION |

**Anti-inflammatories***Nonsteroidal*

|                          |        |
|--------------------------|--------|
| <b>diclofenac sodium</b> |        |
| <b>ketorolac 0.5%</b>    | ACULAR |

*Steroid*

|                                       |               |
|---------------------------------------|---------------|
| <b>dexamethasone sodium phosphate</b> |               |
| <b>fluorometholone 0.1% susp</b>      | FML LIQUIFILM |
| loteprednol 0.5%                      | LOTEMAX       |
| <b>prednisolone acetate 1%</b>        | PRED FORTE    |
| prednisolone phosphate 1%             |               |

**Antivirals**

|                     |          |
|---------------------|----------|
| <b>trifluridine</b> | VIROPTIC |
|---------------------|----------|

**Beta-blockers***Nonselective*

|                            |             |
|----------------------------|-------------|
| timolol hemihydrate        | BETIMOL     |
| <b>timolol maleate</b>     | TIMOPTIC    |
| <b>timolol maleate gel</b> | TIMOPTIC-XE |

*Selective*

|                           |  |
|---------------------------|--|
| <b>betaxolol solution</b> |  |
|---------------------------|--|

**Carbonic Anhydrase Inhibitors***Topical*

|                    |         |
|--------------------|---------|
| <b>dorzolamide</b> | TRUSOPT |
|--------------------|---------|

**Carbonic Anhydrase Inhibitor/Beta-blocker Combinations**

|                                    |        |
|------------------------------------|--------|
| <b>dorzolamide/timolol maleate</b> | COSOPT |
|------------------------------------|--------|

**Dry Eye Disease**

|             |        |
|-------------|--------|
| lifitegrast | XIIDRA |
|-------------|--------|



**Prostaglandins**

|                    |                |
|--------------------|----------------|
| <b>latanoprost</b> | <b>XALATAN</b> |
|--------------------|----------------|

**Sympathomimetics**

|                          |                         |
|--------------------------|-------------------------|
| <b>brimonidine 0.15%</b> | <b>ALPHAGAN P 0.15%</b> |
| <b>brimonidine 0.2%</b>  |                         |

**Sympathomimetic/Beta-blocker Combinations**

|                            |                 |
|----------------------------|-----------------|
| <b>brimonidine/timolol</b> | <b>COMBIGAN</b> |
|----------------------------|-----------------|

**OTIC**

Clinical practice guidelines for the treatment of otitis media are available at:

<http://www.aap.org>

**Anti-infectives**

|                                     |  |
|-------------------------------------|--|
| <b>acetic acid</b>                  |  |
| <b>acetic acid/aluminum acetate</b> |  |
| <b>ofloxacin otic</b>               |  |

**Anti-infective/Anti-inflammatory Combinations**

|  |                         |
|--|-------------------------|
| <b>ciprofloxacin/dexamethasone</b>         | <b>CIPRODEX</b>         |
| <b>neomycin/polymyxin B/hydrocortisone</b> | <b>CORTISPORIN OTIC</b> |

## WEBSITES

Agency for Healthcare Research and Quality  
<http://www.ahrq.gov>

Alzheimer's Association  
<http://www.alz.org>

American Academy of Allergy, Asthma and Immunology  
<http://www.aaaai.org>

American Academy of Child & Adolescent Psychiatry  
<http://www.aacap.org>

American Academy of Dermatology  
<http://www.aad.org>

American Academy of Neurology  
<http://www.aan.com>

American Academy of Ophthalmology  
<http://www.aao.org>

American Academy of Pediatrics  
<http://www.aap.org>

American Association for the Study of Liver Disease  
<http://www.aasld.org>

American Association of Clinical Endocrinologists  
<http://www.aace.com>

American Association of Diabetes Educators  
<http://www.diabeteseducator.org>

American Cancer Society  
<http://www.cancer.org>

American College of Allergy, Asthma and Immunology  
<http://www.acaai.org>

American College of Cardiology  
<http://www.acc.org>

American College of Chest Physicians  
<http://www.chestnet.org>

American College of Gastroenterology  
<http://gi.org>

American College of Physicians  
<http://www.acponline.org>

American College of Rheumatology  
<http://www.rheumatology.org>

American Congress of Obstetricians and Gynecologists  
<http://www.acog.org>

American Diabetes Association  
<http://www.diabetes.org>

American Gastroenterological Association  
<http://www.gastro.org>

American Headache Society Committee for Headache Education  
<http://www.achenet.org>

American Heart Association  
<http://www.myamericanheart.org>

American Lung Association  
<http://www.lung.org>

American Medical Association  
<http://www.ama-assn.org>

American Psychiatric Association  
<http://www.psych.org>

American Society of Anesthesiologists  
<http://www.asahq.org>

American Society of Clinical Oncology  
<http://www.asco.org>

American Society of Interventional Pain Physicians  
<http://www.asipp.org>

American Urological Association  
<http://www.auanet.org>

Centers for Disease Control and Prevention  
<http://www.cdc.gov>

Centers for Disease Control and Prevention  
Guideline topics: AIDS  
<http://www.cdc.gov/hiv/default.html>

Centers for Disease Control and Prevention  
Guideline topics: Sexually Transmitted Diseases  
<http://www.cdc.gov/std/treatment/default.htm>

CVS Caremark  
<http://www.caremark.com>

The Food and Drug Administration  
<http://www.fda.gov>

Global Initiative for Asthma  
<http://www.ginasthma.com>

Infectious Diseases Society of America  
<http://www.idsociety.org>

Institute for Safe Medication Practices  
<http://www.ismp.org>

Johns Hopkins AIDS Service  
<http://www.thebody.com/content/art12096.html>

Juvenile Diabetes Research Foundation International  
<http://jdrf.org>

MedWatch  
<http://www.fda.gov/Safety/MedWatch/default.htm>

National Agricultural Library  
<http://www.nal.usda.gov>

National Cancer Institute  
<http://www.cancer.gov/cancertopics>

National Comprehensive Cancer Network  
<http://www.nccn.org>

National Foundation for Infectious Diseases  
<http://www.nfid.org>

National Guideline Clearinghouse  
<http://www.guideline.gov>

National Heart, Lung and Blood Institute  
<http://www.nhlbi.nih.gov>

National Institutes of Health  
<http://www.nih.gov>

National Kidney Foundation  
<http://www.kidney.org>

National Osteoporosis Foundation  
<http://www.nof.org>

North American Menopause Society  
<http://www.menopause.org>

United States Department of Health and Human  
Services  
<http://www.hhs.gov>

World Health Organization  
<http://www.who.int>

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